

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000080522

Entity Name: HSA MANAGEMENT, INC.

FILED  
Apr 27, 2009  
Secretary of State

## Current Principal Place of Business:

4801 S UNIVERSITY DRIVE, SUITE 3100  
DAVIE, FL 33328

## New Principal Place of Business:

6601 NW 14H STREET  
SUITE 3  
PLANTATION, FL 33313

## Current Mailing Address:

4801 S UNIVERSITY DRIVE, SUITE 3100  
DAVIE, FL 33328

## New Mailing Address:

6601 NW 14H STREET  
SUITE 3  
PLANTATION, FL 33313

FEI Number: 26-3283678

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

STANDER, ALAN E  
4801 S UNIVERSITY DRIVE, SUITE 3100  
DAVIE, FL 33328 US

## Name and Address of New Registered Agent:

STANDER, ALAN E  
6601 NW 14TH STREET  
SUITE 3  
PLANTATION, FL 33313 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: \_\_\_\_\_

04/27/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: STANDER, ALAN E  
Address: 4920 SW 170TH AVE  
City-St-Zip: SOUTHWEST RANCHES, FL 33331

Title: D ( ) Delete  
Name: SHEWITZ, THERESE S  
Address: 1721 VICTORIA POINTE CIRCLE  
City-St-Zip: WESTON, FL 33327

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ALAN STANDER

PRES

04/27/2009

Electronic Signature of Signing Officer or Director

Date