

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000005548

FILED
Mar 18, 2005
Secretary of State

Entity Name: HEALTHCARE INVESTMENT ADVISORS, INC.

Current Principal Place of Business:

2259 ST. CHARLES DRIVE
CLEARWATER, FL 33764

New Principal Place of Business:

Current Mailing Address:

2259 ST. CHARLES DRIVE
CLEARWATER, FL 33764

New Mailing Address:

FEI Number: 59-3553321

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

O'CONNOR, PATRICK M
2240 BELLEAIR RD. STE. 160
CLEARWATER, FL 33764 US

Name and Address of New Registered Agent:

O'CONNOR, PATRICK M
1250 S BELCHER RD
160
LARGO, FL 337715207 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:

Electronic Signature of Registered Agent

03/18/2005

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: SASSOUNI, CHRISTOF G
Address: 2259 ST. CHARLES DRIVE
City-St-Zip: CLEARWATER, FL 33764

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DR (X) Change () Addition
Name: SASSOUNI, CHRISTOF G
Address: 2259 ST. CHARLES DRIVE
City-St-Zip: CLEARWATER, FL 33764 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: CHRIS G SASSOUNI

Electronic Signature of Signing Officer or Director

PRES

03/18/2005

Date