No. W 49560		Due no later than Apr 30, 2010	2. Registered Ager	2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	CATALINA VESHALI I 200 CARIL	Annual Report Form g Address: Correct in this box if needed. HEALTH RESOURCE LLC PATEL LON PKWY SBURG FL 33716	1111 W JEFFER BOISE ID 8370 USA	CT CORPORATION SYSTEM 1111 W JEFFERSON STE 530 BOISE ID 83702			
NO FILING FEE IF RECEIVED BY DUE DATE							
200 200 00 0 0 0 0 0 0 0 0 0 0 0 0 0 0	ter Names and Addre	esses of at least one Member or Manager.			_		
Office Held Name		Street or PO Address	City	State	Country	Postal Code	
MANAGER RICK	FRIER	200 CARILLON PKWY	ST PETERSBURG	FL	USA	33716	
MANAGER ERIC	WILLIAMS	200 CARILLON PKWY	ST PETERSBURG	FL	USA	33716	
MANAGER BARRY BRINDISE		200 CARILLON PKWY	ST PETERSBURG	FL	USA	33716	
5. Organized Under the Laws of:	6. Annual Re	eport must be signed.*					
DE	Signature	Signature: Barry Brindise		Date: 04/21/2010			
W 49560	Name (typ	Name (type or print): Barry Brindise		Title: Manager			
Processed 04/21/2010	* Electronically provided signatures are accepted as original signatures.						