



State of Rhode Island
and Providence Plantations
Office of the Secretary of State

A. Ralph Molis, Secretary of State
Corporations Division
148 W. River Street
Providence, RI 02904-2613
401.222.3046

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2009

Filing Period: January 1 - March 1 - Filing Fee: \$50.00* - THIS REPORT MUST BE TYPED OR PRINTED LEGIBLY IN BLACK INK.

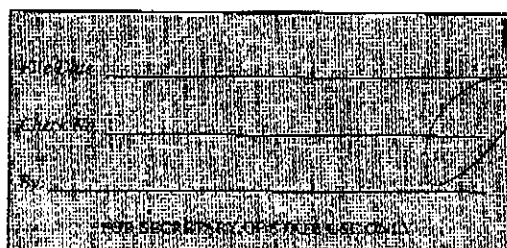
* In accordance with R.I.G.L. 7-1.2-1501(e), each corporation failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-1.2-1501(c+d)) is subject to a penalty fee of \$25.00.

1. Corporate ID No. 000275880		2. Name of Corporation Health Care Exchange Ltd.			
3. Street Address Principal Business Office 25925 Telegraph Rd., Suite 400			City Southfield	State Michigan	Zip 48033
4. Business Phone No. 248-327-5276		5. State of Incorporation Michigan			
6. Brief Description of the Character of Business Conducted in Rhode Island Dental Pro Network					
7. NAMES AND ADDRESSES OF THE OFFICERS: (X) BOX FOR ATTACHMENT () FILE IN SPACES BEFORE USING ATTACHMENTS					
President Name John J Doyle			Vice President Name		
Street Address 25925 Telegraph Rd., Suite 400			Street Address		
City Southfield	State Michigan	Zip 48033	City	State	Zip
Secretary Name Brian Charlton			Treasurer Name Richard Werther		
Street Address 25925 Telegraph Rd., Suite 400			Street Address 25925 Telegraph Rd., Suite 400		
City Southfield	State Michigan	Zip 48033	City Southfield	State Michigan	Zip 48033
8. NAMES AND ADDRESSES OF THE DIRECTORS: (X) BOX FOR ATTACHMENT () FILE IN SPACES BEFORE USING ATTACHMENTS					
Director Name Anthony J Trani			Director Name		
Street Address 25925 Telegraph Rd., Suite 400			Street Address		
City Southfield	State Michigan	Zip 48033	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. SHARES AUTHORIZED: (X) BOX FOR ATTACHMENT () FILE IN SPACES BEFORE USING ATTACHMENTS					
This information is currently of record in the Office of the Secretary of State. Changes require an additional filing. See Section 9 of instruction sheet.			ISSUED SHARES — THIS SECTION MUST BE COMPLETED		
250,000 Common \$1.00			Number of Shares 5000	Class/Series Common	Par Value 1.00
			THIS SECTION MUST BE COMPLETED		

This report must be executed on behalf of the corporation by an authorized representative. If the corporation is in the hands of a receiver or trustee, this report must be executed on behalf of the corporation by the receiver or trustee.

FILED

JUL 22 2009



By Richard J Werther
2995086

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Richard J Werther 7-16-09
Signature Date

Richard J Werther

Print or Type Name

Treasurer

Title