

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000092813

FILED
Mar 28, 2011
Secretary of State

Entity Name: MEDICARE ACCOUNTABILITY REIMBURSEMENT SOLUTIONS, LLC

Current Principal Place of Business:

912 JACKSON ST N
ST. PETERSBURG, FL 33705

New Principal Place of Business:

Current Mailing Address:

912 JACKSON ST N
ST. PETERSBURG, FL 33705

New Mailing Address:

FEI Number: 20-2115682

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HART, JEANNINE
546 26TH AVENUE NORTH
ST. PETERSBURG, FL 337042830 US

Name and Address of New Registered Agent:

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

_____ Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM
Name: HART, JEANNINE
Address: 546 26TH AVENUE NORTH
City-St-Zip: ST. PETERSBURG, FL 337042830

Title: MGRM
Name: HART, RICHARD
Address: 546 26TH AVENUE NORTH
City-St-Zip: ST. PETERSBURG, FL 337042830

I hereby certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: LA FISCHER

CPA

03/28/2011

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date