

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000050901

FILED  
Apr 17, 2007  
Secretary of State

Entity Name: MATRIX HEALTHCARE SERVICES, INC.

## Current Principal Place of Business:

5706 BENJAMIN CENTER DR  
SUITE 103  
TAMPA, FL 33634

## New Principal Place of Business:

## Current Mailing Address:

5706 BENJAMIN CENTER DR  
SUITE 103  
TAMPA, FL 33634

## New Mailing Address:

FEI Number: 59-3720653      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

WEINBREN, DON B  
101 E. KENNEDY BLVD.  
STE. 2700  
TAMPA, FL 33602 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: CEO ( ) Delete  
Name: MACDONALD, STEVEN A  
Address: 740 CORAL REEF  
City-St-Zip: TAMPA, FL 33602

Title: PD ( ) Delete  
Name: FRITCH, GUERRY S  
Address: 4201 WAYSIDE WILLOW COURT  
City-St-Zip: TAMPA, FL 33624

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CEOD (X) Change ( ) Addition  
Name: MACDONALD, STEVEN A  
Address: 740 CORAL REEF  
City-St-Zip: TAMPA, FL 33602

Title: D (X) Change ( ) Addition  
Name: CARDY, THOMAS W  
Address: 12808 HARBORWOOD DR  
City-St-Zip: LARGO, FL 33774

Title: D ( ) Change (X) Addition  
Name: BEANS, JASON  
Address: 850 N MILWAUKEE #320  
City-St-Zip: CHICAGO, IL 60622

I hereby certify that the information supplied with this filing does not qualify for the 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: STEVEN A. MACDONALD

CEO

04/17/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date