

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000018148

FILED
Jan 28, 2008
Secretary of State

Entity Name: MEDICAL REVIEW CONSULTANTS, INC.

Current Principal Place of Business:

4703 WATER WITCH PT DR
ORLANDO, FL 32806 US

New Principal Place of Business:

Current Mailing Address:

P O BOX 532002
ORLANDO, FL 32853002 US

New Mailing Address:

FEI Number: 59-3190342

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

THOMAS F. LANG
1000 LEGION PLACE STE 100
ORLANDO, FL 32801 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: T () Delete
Name: MUMBY, ROBERT C JR
Address: 36 SOUTH HAMPTON AVE
City-St-Zip: ORLANDO, FL

Title: D () Delete
Name: MUMBY, PEGGY W
Address: 4703 WATERWITCH POINTE DR
City-St-Zip: ORLANDO, FL 32806

Title: D () Delete
Name: MUMBY, ROBERT C
Address: 4703 WATERWITCH POINTE DR
City-St-Zip: ORLANDO, FL 32806

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: PEGGY W. MUMBY

VP

01/28/2008

Electronic Signature of Signing Officer or Director

_____ Date