2003 FOR PROFIT CORPORATION

UNIFORM BUSINESS REPORT (UBR) P94000082966 **DOCUMENT#**

FILED May 01, 2003 8:00 an Secretary of State

n	0023049	
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1. Entity Name MEDI-BILL OF NORTH FLORIDA, INC.					05-01-2003 90315 043 ***150.00							
		** ***		4 .	16							
Principal Plac 2165 HERSCH JACKSONVILL US			2165	Mailing Address 2165 HERSCHEL ST. JACKSONVILLE FL 32204 US								
Principal Place of Business 3. Mailing Address						11 /// 11/07 (1		8111 1 1 111 181				
Suite, Apt. #, etc. Suite, Apt. #, etc.			CHECK HERE IF MA			MAKING	AKING CHANGES					
City & Stat	City & State City & State				4. FEI Number 59-3274637				oplied For ot Applicable			
Zìp	_	Country	Zip	Zip Countr			5. Certificate of Statu	ıs Desired		\$8.75 Add ee Require		
	6. Name	and Address of Curr	ent Registere	d Agent			7. Name and Addres	ss of New Reg	gistered A	gent		
akel, ed	WADD C		•		Na	ıme				-		
•	NDENT DR.				Str	reet Address (F	P.O. Box Number is Not	Acceptable)	 -	-		
SUITE 230					 							
		202			- 0:4		 			I 7 Cod		
JACKSONVILLE FL 32202		Cit	.y 			FL_	Zip Cod	3 				
8. 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. I am familiar with, and accept the obligations of registered agent.												
SIGNATURE .	Signature, typed o	r printed name of registered a	gent and title if app	licable, (NOTE	Registered Agent	t signature required	when reinstating)		DATE		-	
Afte	r May 1, 2003	FEE IS \$150.00 Fee will be \$550. Florida Departmen						ampaign Finar Contribution.			O May Be I to Fees	
10.		OFFICERS A	ND DIRECTO	RS	11.		ADDITIONS/CHANG	SES TO OFFIC	ERS AND	DIRECTORS	3 IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P TUNSTILL, 2165 HERS JACKSONV			□ Delete	, TITLE NAME	VP Chei				Change	☐ Addition)	
TITLE	O.T.	ILLE IL JZZU4			STREET ADD	RESS 216	n,aBai X 5 Herschel ksonville,		2204			
NAME	ST	ILLE I'L 32204		☐ Delete	•	P Jacl	5 Herschel ksonville,		2204	☐ Change	☐ Addition	
	PERRY, PH	IL C		☐ Delete	CITY-ST-ZIF TITLE NAME	P Jack	5 Herschel ksonville, m, Paul M.	FL 3	2204	☐ Change	☐ Addition	
STREET ADDRESS	PERRY, PH 2165 HERS	IL C CHEL ST		☐ Delete	CITY-ST-ZIF TITLE NAME STREET ADD	P Jacl VP Crur RESS 216	5 Herschel ksonville, m, Paul M. 5 Herschel	Jr.		☐ Change	☐ Addition	
STREET ADDRESS CITY-ST-ZIP	PERRY, PH 2165 HERS JACKSONV	IL C CHEL ST ILLE FL 32204			CITY-ST-ZII TITLE NAME STREET ADD CITY-ST-ZII	Jacks 2165 Jacks VP Crur 2165 Jacks Jacks	5 Herschel ksonville, m, Paul M.	Jr.	2204			
STREET ADDRESS	PERRY, PH 2165 HERS	IL C CHEL ST ILLE FL 32204	÷	☐ Delete	CITY-ST-ZIF TITLE NAME STREET ADD	RESS 2169 VP Crur 2169 Jac) VP Crur 2169 VP Gree	5 Herschel ksonville, m, Paul M. 5 Herschel ksonville, ene, Roger	Jr. St FL 3		☐ Change	☐ Addition	
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	PERRY, PH 2165 HERS JACKSONV VP CHAPMAN, 2165 HERS	IL C CHEL ST ILLE FL 32204 JAMES G CHEL ST	£		CITY-ST-ZII TITLE NAME STREET ADD CITY-ST-ZII TITLE NAME STREET ADD	RESS 2165 P Jacl VP Crur 2165 Jacl VP Gree RESS 2165	Herschelksonville, Paul M. Herschelksonville, Roger Herschel	Jr. St FL 3:	2204			
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	PERRY, PH 2165 HERS JACKSONV VP CHAPMAN, 2165 HERS JACKSONV	IL C CHEL ST ILLE FL 32204 JAMES G CHEL ST	÷	☐ Delete	CITY-ST-ZII TITLE NAME STREET ADD CITY-ST-ZIF TITLE NAME STREET ADD CITY-ST-ZIF	RESS 2165 P Jacl VP Crur 2165 Jacl VP Gree 2165 Jacl	5 Herschel ksonville, m, Paul M. 5 Herschel ksonville, ene, Roger	Jr. St FL 3:	2204	☐ Change	Addition	
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	PERRY, PH 2165 HERS JACKSONV VP CHAPMAN, 2165 HERS JACKSONV DVP	IL C CHEL ST ILLE FL 32204 JAMES G CHEL ST ILLE FL 32204	·- ·—		CITY-ST-ZII TITLE NAME STREET ADD CITY-ST-ZIF TITLE NAME STREET ADD CITY-ST-ZIF	RESS 2165 P Jacl VP Crur 2165 P Jacl VP Gree RESS 2165 Jacl	Herschelksonville, The Herschelksonville, The Roger Herschelksonville,	Jr. St FL 3: W. St FL 3:	2204			
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	PERRY, PH 2165 HERS JACKSONV VP CHAPMAN, 2165 HERS JACKSONV DVP LINEBERRY	IL C CHEL ST ILLE FL 32204 JAMES G CHEL ST ILLE FL 32204	·- ·—	☐ Delete	CITY-ST-ZII TITLE NAME STREET ADD CITY-ST-ZIF TITLE NAME STREET ADD CITY-ST-ZIF	RESS 2165 P Jacl VP Crur 2165 Jacl VP Gree RESS Jacl	Herschelksonville, Paul M. Herschelksonville, Roger Herschel	Jr. St FL 3: W. St FL 3:	2204	☐ Change	Addition	
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	PERRY, PH 2165 HERS JACKSONV VP CHAPMAN, 2165 HERS JACKSONV DVP LINEBERRY 2165 HERS	IL C CHEL ST ILLE FL 32204 JAMES G CHEL ST ILLE FL 32204	·- ·—	☐ Delete	CITY-ST-ZII TITLE NAME STREET ADD CITY-ST-ZIF TITLE NAME CITY-ST-ZIF TITLE NAME NAME	RESS 216: Jac) VP Crur 216: Jac) VP Gree 216: Jac) VP Gree 216: Jac)	Merschel ksonville, m, Paul M. Herschel ksonville, Pane, Roger Herschel ksonville,	Jr. St FL 3: W. St FL 3:	2204	☐ Change	Addition	
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	PERRY, PH 2165 HERS JACKSONV VP CHAPMAN, 2165 HERS JACKSONV DVP LINEBERRY 2165 HERS JACKSONV VP	IL C CHEL ST ILLE FL 32204 JAMES G CHEL ST ILLE FL 32204 , PAUL J CHEL ST ILLE FL 32204	·- ·—	☐ Delete	CITY-ST-ZII TITLE NAME STREET ADD CITY-ST-ZIF TITLE NAME STREET ADD CITY-ST-ZIF TITLE NAME STREET ADD	RESS 2165 P Jacl VP Crur 2165 Jacl VP Gree 2165 Jacl VP Gree 2165 Jacl VP DOWN	Herschel Ksonville, m, Paul M. Herschel Ksonville, ene, Roger Herschel Ksonville, WAN, HEVILLE HERSCHE	Jr. St FL 3: W. St FL 3:	2204	☐ Change	Addition	
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME TREET ADDRESS TREET ADDRESS TREET ADDRESS TREET ADDRESS TITLE NAME	PERRY, PH 2165 HERS JACKSONV VP CHAPMAN, 2165 HERS JACKSONV DVP LINEBERRY 2165 HERS JACKSONV VP GOLDBOLD	IL C CHEL ST ILLE FL 32204 JAMES G CHEL ST ILLE FL 32204 , PAUL J CHEL ST ILLE FL 32204 T, ANTHONY G	·- ·—	Delete Delete	CITY-ST-ZII TITLE NAME STREET ADD	RESS 216: VP Crur 216: Jac) VP Gree 216: Jac) VP Gree 216: VP Date: VP Date: VP Hard	Herschel Ksonville, m, Paul M. Herschel Ksonville, ene, Roger Ksonville, WAN, PEVILLE HERSCHE	Jr. St FL 3: W. St FL 3: FL 3: FL 3: FL 3:	2204	☐ Change ☐ Change	☐ Addition Addition	
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	PERRY, PH 2165 HERS JACKSONV VP CHAPMAN, 2165 HERS JACKSONV DVP LINEBERRY 2165 HERS JACKSONV VP GOLDBOLD 2165 HERS	IL C CHEL ST ILLE FL 32204 JAMES G CHEL ST ILLE FL 32204 , PAUL J CHEL ST ILLE FL 32204 T, ANTHONY G CHEL ST	·- ·—	Delete Delete	CITY-ST-ZIF TITLE NAME STREET ADD STREET ADD STREET ADD STREET ADD STREET ADD	RESS 2165 P Jacl VP Crur 2165 Jacl VP Gree 2165 Jacl VP Gree VP DATE P VP Hard 2165	Herschel Ksonville, m, Paul M. Herschel Ksonville, Ene, Roger Herschel Ksonville, WAN, PEVILLE HERSCHE HERSCHE HERSCHE HERSCHE Herschel	Jr. St FL 3: W. St FL 3: FL 3: FL 3: FL 3: FL 3: FL 3:	2204 2204	☐ Change ☐ Change	☐ Addition Addition	
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STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	PERRY, PH 2165 HERS JACKSONV VP CHAPMAN, 2165 HERS JACKSONV DVP LINEBERRY 2165 HERS JACKSONV VP GOLDBOLD 2165 HERS	IL C CHEL ST ILLE FL 32204 JAMES G CHEL ST ILLE FL 32204 , PAUL J CHEL ST ILLE FL 32204 T, ANTHONY G CHEL ST ILLE FL 32204	·- ·—	Delete Delete	CITY-ST-ZIF TITLE NAME STREET ADD STREET ADD STREET ADD STREET ADD STREET ADD	RESS 2165 P Jacl VP Crur 2165 Jacl VP Gree 2165 Jacl VP LONG RESS Jacl VP Hard 2165 Jacl VP Hard 2165 Jacl VP	Herschel Ksonville, m, Paul M. Herschel Ksonville, Ene, Roger Herschel Ksonville, WAN, PEVILLE HERSCHE HERSCHE HERSCHE HERSCHE Herschel	Jr. St FL 3: W. St FL 3: FL 3: FL 3: FL 32:	2204 2204 22-0-	☐ Change ☐ Change	☐ Addition Addition	
STREET ADDRESS CITY-ST-ZIP TITLE NAME	PERRY, PH 2165 HERS JACKSONV VP CHAPMAN, 2165 HERS JACKSONV DVP LINEBERRY 2165 HERS JACKSONV VP GOLDBOLD 2165 HERS JACKSONV VP SOHA, WAL 2165 HERS	IL C CHEL ST ILLE FL 32204 JAMES G CHEL ST ILLE FL 32204 , PAUL J CHEL ST ILLE FL 32204 T, ANTHONY G CHEL ST ILLE FL 32204	·- ·—	Delete Delete Delete	CITY-ST-ZIE TITLE NAME STREET ADD CITY-ST-ZIE TITLE TITLE NAME STREET ADD CITY-ST-ZIE TITLE	RESS 2165 P VP Crur 2165 P Jac) VP Gree 2165 P Jac) VP Hard 165 P VP Hard 2165 P VP Hard 2165 P VP Hard 2165 P VP Hard 2165 P VP Herr 2165	Herschel ksonville, m, Paul M. Herschel ksonville, ene, Roger Herschel ksonville, VAN, LEVIUS HERSCHE HERSCHE HERSCHE HERSCHE KSONVILLE ding, Kath Herschel ksonville,	Jr. St FL 3: W. St FL 3: FL 3: FL 3: FL 32: Ary-Jin St	2204 2204 22-0-	☐ Change ☐ Change ☐ Change	Addition Addition	

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # (P94000082966

1. Entity Name

MEDI-BILL OF NORTH FLORIDA, INC.



Principal Place 2165 HERSCHE JACKSONVILLE US	EL ST. : FL 32204	Mailing Address 2165 HERSCHEL ST. JACKSONVILLE FL 32204 US									
Principal Place of Business Mailing Address				i (Barana) (III)					11 EBIN BBNS BEIS	14113 11818 12168	**************************************
Suite, Apt.	Suite, Apt. #, etc.	#, etc.			☐ CHECK HERE IF MAKING CHANGES						
City & State		City & State				4. FEI Number 59-3274637					oplied For ot Applicable
. Zip	Country	Zip	Coun	ntry		5. Cert	tificate of St	atus Desir	ed D	\$8.75 Ad	
	6. Name and Address of Current	Registered Agent				7. Nam	ne and Add	ress of Ne	w Registered	Agent	·
سعارات سيستوعم		عرف المسائد		Name					. يد حري دري		
akel, edv	VARD C			Street A	ddress (F	P.O. Box I	Number is N	lot Accept	able)		
1 INDEPEN	IDENT DR.				.,					<u> </u>	· ·
SUITE 230	1										1
JACKSONV	/ILLE FL 32202			City					FL	Zip Coc	e
	named entity submits this statement for	the purpose of changing its	register	ed office or	registere	ed agent,	or both, in	the State o		familiar with,	and accept
		•									ļ
SIGNATURE _	Signature, typed or printed name of registered agent a	nd title if applicable. (NOTE	Registere	d Agent signet	re required	when reinsta	ting)		DATE		
/ Atter	E=NOWI11 FEE IS \$150.00; May i1 2003 Fee Will be: \$550.00 Payable to Florida Deparment of	25.26.25.2					Trust Fu	nd Contrib		Adde	May Be to Fees
10.	OFFICERS AND		11.			ADDIT	10NS/CHA	NGES TO	OFFICERS ANI		
CITY-ST-ZIP	VP Kerr, III, James 2165 HERSCHEL ST JACKSONVILLE FL 32204	□ Delete			2165	He	Armandrschei	l St	32204	□ Change	☐ Addition
NAME STREET ADDRESS	: VP' Koehler, David C 2165 HERSCHEL ST JACKSONVILLE FL 32204	☐ Delete				enber 5 He	rg, Lorsche ville		32204	☐ Change	☐ Addition
NAME	VP Lee, Edward M	☐ Delete	TITLE NAM	!E	Scot	cott tt,	John I	D 1~c+		Change	☐ Addition
	2165 HERSCHEL ST JACKSONVILLE FL 32204			ET ADDRESS *			ville		32204		
NAME STREET ADDRESS	VP Boggs, Ralph B 2165 HERSCHELST	Delets	NAM STRE		2165	5 H 8	Willia ERSCr	tElm 5		☐ Change	udition
	JACKSONVILLE FL 32204		СПҮ	-ST-ZIP	JAC	K501	141 Lit	<u>: ٣٠</u>	3220	4	<u>. </u>
NAME	VP Patterson, Sarah 2165 HERSCHEL ST JACKSONVILLE FL 32204	Delete L .	N				•			☐ Change	☐ Addition
TITLE NAME STREET ADDRESS	VP Ponte, Robert A 2165 HERSCHEL ST. JACKSONVILLE FL 32-2041	☐ Delete	TITLE NAM STRE	E .						☐ Change	☐ Addition
12. I hereby ce indicated o of the corp changed, o	ertify that the information supplied with on this report or supplemental report is location or the receiver or trustee empo or on an attachment with an address, w	this filing does not qualify/or true and accurate and inat m wered to execute this report in all other like empowered.	the exe ny signa as requi	mption stat ture shall h red by Cha	ed in Sec ave the s pter 607,	ction 119 ame lega Florida 9	.07(3)(i), Flo al effect as i Statutes; an	orida Statu f made und d that my r	tes, I further ce der oath; that I name appears i	rtify that the i am an officer n Block 10 o	nformation or director Block 11 if

SIGNATURE:

OFFICER OR DIRECTOR

Daytime Phone #