

2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L05712

Entity Name: MEDICAL CLAIMS PROCESSORS GROUP, INC.

Current Principal Place of Business:

725 N HWY A1A
SUITE D-102
JUPITER, FL 33477

FILED
Apr 03, 2014
Secretary of State
CC1866059813

Current Mailing Address:

P O BOX 8063
JUPITER, FL 33468-8063 US

FEI Number: 65-0152362

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

HINES, ELAINE C.
725 N HWY A1A
SUITE D-102
JUPITER, FL 33477 US

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

Officer/Director Detail :

Title P
Name HINES, ELAINE C.
Address 725 N HWY A1A SUITE D-102
City-State-Zip: JUPITER FL 33477

Title V
Name O'SULLIVAN, STEPHANIE B.
Address 725 N HWY A1A SUITE D-102
City-State-Zip: JUPITER FL 33477

I hereby 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 all other like empowered.

SIGNATURE: STEPHANIE B. O'SULLIVAN

V

04/03/2014

Electronic Signature of Signing Officer/Director Detail

Date