

**2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P01000102629

**Entity Name:** ACCU-SCRIPT REPORTING, INC.

**Current Principal Place of Business:**

14141 5TH ST  
DADE CITY, FL 33525

**Current Mailing Address:**

P O BOX 1794  
DADE CITY, FL 33526 US

**FEI Number:** 59-3750707

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

GREGG, WILLIAM  
14144 6TH STREET  
DADE CITY, FL 33525 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	D	Title	D
Name	DENNIS, JACK R	Name	DENNIS, LYNNE
Address	11880 SE 196TH ST	Address	11880 SE 196TH STREET
City-State-Zip:	DUNNELLON FL 34431	City-State-Zip:	DUNNELLON FL 34431

*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:** LYNNE D. DENNIS

**DIRECTOR**

**04/04/2013**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date