

2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000038664

Entity Name: PHYSICIAN SUBMISSION SERVICES, INC.

Current Principal Place of Business:

15 EBY CHIQUES RD
MOUNT JOY, PA 17552

Current Mailing Address:

15 EBY CHIQUES RD.
MOUNT JOY, PA 17552 US

FEI Number: 20-4572412

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GALLION, LINDA
3643 CORTEZ RD. WEST
BRADENTON, FL 34210 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: LINDA GALLION

08/23/2017

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PT
Name ESTOCK, DOUG
Address 15 EBY CHIQUES RD
City-State-Zip: MOUNT JOY PA 17552

Title S
Name GROSSMAN, ERIC
Address 135 S. LASALLE, STE. 3950
City-State-Zip: CHICAGO IL 60603

Title D
Name MALOO, ANIL
Address 15 EBY CHIQUES RD.
City-State-Zip: MOUNT JOY PA 17552

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: ERIC GROSSMAN

SECRETARY

08/23/2017

Electronic Signature of Signing Officer/Director Detail

Date