

2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000104291

Entity Name: PROVIDERS BILLING SERVICES, INC.

Current Principal Place of Business:

801 JENKS AVE.
SUITE G
PANAMA CITY, FL 32401

Current Mailing Address:

801 JENKS AVE.
SUITE G
PANAMA CITY, FL 32401 US

FEI Number: 38-3792756

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BUCHHOLZ, JODI M
801 JENKS AVE.
SUITE G
PANAMA CITY, FL 32401 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: JODI M. BUCHHOLZ

04/24/2015

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title CEO
Name BUCHHOLZ, JODI M
Address 801 JENKS AVE.
 STE. G
City-State-Zip: PANAMA CITY FL 32401

Title CFO
Name BUCHHOLZ, ROBERT A
Address 801 JENKS AVE.
 SUITE G
City-State-Zip: PANAMA CITY FL 32401

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: ROBERT BUCHHOLZ

**CHIEF FINANCIAL
OFFICER**

04/24/2015

Electronic Signature of Signing Officer/Director Detail

Date