## 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L01000001686

Entity Name: PHYSICIAN BILLING SOLUTIONS, LLC

FILED Jan 03, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

5150 LINTON BLVD. 8200 JOG ROAD SUITE 400 SUITE 101

DELRAY BEACH, FL 33484 US BOYNTON BEACH, FL 33437 US

Current Mailing Address: New Mailing Address:

5150 LINTON BLVD. 8200 JOG ROAD

SUITE 400 SUITE 101

DELRAY BEACH, FL 33484 US BOYNTON BEACH, FL 33437 US

FEI Number: 65-1071014 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

BRUNS, CHRISTOPHER C PRES
5150 LINTON BLVD.
8200 JOG ROAD
SUITE 400

SUITE 400 SUITE 101
DELRAY BEACH, FL 33484 US BOYNTON BEACH, FL 33437 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: CHRISTOPHER C. BRUNS 01/03/2007

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

( ) Delete MGRM Title: (X) Change ( ) Addition BRUNS, CHRISTOPHER C PRES BRUNS, CHRISTOPHER C PRES Name: Name: Address: 5150 LINTON BLVD. Address: 8200 JOG ROAD, STE 101 City-St-Zip: DELRAY BEACH, FL 33484 US City-St-Zip: BOYNTON BEACH, FL 3437 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: CHRISTOPHER C. BRUNS PRES 01/03/2007