

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000089901

FILED
Mar 14, 2006
Secretary of State

Entity Name: PRECISION MEDICAL BILLING LLC

Current Principal Place of Business:

4900 62ND AVE. SOUTH
ST. PETERSBURG, FL 33715

New Principal Place of Business:

1135 PASADENA AVENUE SOUTH
SUITE 231
SOUTH PASADENA, FL 33707

Current Mailing Address:

4900 62ND AVE. SOUTH
ST. PETERSBURG, FL 33715

New Mailing Address:

1135 PASADENA AVENUE SOUTH
SUITE 231
SOUTH PASADENA, FL 33707

FEI Number: 16-1734962

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BRAFFORD, KAREN
4900 62ND AVE. SOUTH
ST. PETERSBURG, FL 33715 US

Name and Address of New Registered Agent:

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

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: BRAFFORD, KAREN
Address: 4900 62ND AVE. SOUTH
City-St-Zip: ST. PETERSBURG, FL 33715

Title: MGRM () Delete
Name: COGGINS, LYNDIA
Address: 4900 62ND AVE. SOUTH
City-St-Zip: ST. PETERSBURG, FL 33715

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGRM (X) Change () Addition
Name: COGGINS, LYNDIA
Address: 3721 VILLAGE ESTATES PLACE
City-St-Zip: TAMPA, FL 33618

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: KAREN S. BRAFFORD

MGRM

03/14/2006

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date