

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000113742

FILED
Mar 27, 2007
Secretary of State

Entity Name: NATURE COAST MEDICAL BILLING LLC

Current Principal Place of Business:

2124 WEST SEWAHA STREET
TAMPA, FL 33612

New Principal Place of Business:

6135 VALLEY VIEW DR
BROOKSVILLE, FL 34601

Current Mailing Address:

2124 WEST SEWAHA STREET
TAMPA, FL 33612

New Mailing Address:

6135 VALLEY VIEW DR
BROOKSVILLE, FL 34601

FEI Number: 20-3930969

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HACKNEY, ELIZABETH
2124 WEST SEWAHA STREET
TAMPA, FL 33612 US

Name and Address of New Registered Agent:

HACKNEY, ELIZABETH
6135 VALLEY VIEW DR
BROOKSVILLE, FL 34601 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:

03/27/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: HACKNEY, ELIZABETH
Address: 2124 WEST SEWAHA STREET
City-St-Zip: TAMPA, FL 33612

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: HACKNEY, ELIZABETH
Address: 6135 VALLEY VIEW DR
City-St-Zip: BROOKSVILLE, FL 34601

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: ELIZABETH M HACKNEY

MGRM

03/27/2007

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