2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# L06046

Entity Name: PROXYMED, INC.

FILED Oct 11, 2005 Secretary of State

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

2555 DAVIE ROAD 1854 SHACKLEFORD COURT

SUITE 200 SUITE 110

FT. LAUDERDALE, FL 33317 US NORCROSS, GA 33093 US

Current Mailing Address:

New Mailing Address:

2555 DAVIE RD. SUITE 110

FT. LAUDERDALE, FL 33317 US

FEI Number: 65-0202059 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:

CORPORATE CREATIONS NETWORK, INC. 11380 PROSPERITY FARMS ROAD #221E PALM BEACH GARDENS, FL 33410

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: DANIEL GLATZ

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CFOC () Delete Title: CFOC (X) Change () Addition

HOOVER, MICHAEL K Name: Name: LETTKO, JOHN G 1854 SHACKLEFORD COURT,#200 1854 SHACKLEFORD COURT,#200 Address: Address:

NORCROSS, GA 30093 US City-St-Zip: NORCROSS, GA 30093 US City-St-Zip:

Title: CFOT (X) Change () Addition Title: CFOT () Delete

Name: EISENHAUER, GREGORY J Name: O'DOWD, DOUGLAS

1854 SHACKLEFORD COURT,#200 1854 SHACKLEFORD COURT,#200 Address: Address:

NORCROSS, GA 30093 US City-St-Zip: City-St-Zip: NORCROSS, GA 30093 US

Title: () Delete Title: () Change () Addition OLES, DAVID E Name: Name:

1854 SHACKLEFORD COURT,#200 Address Address: City-St-Zip: NORCROSS, GA 30093 US City-St-Zip:

Title: () Delete Title: () Change () Addition

COOPERMAN, EDWIN M Name: Name: Address: C/O 1854 SHACKLEFORD COURT,#200 Address: City-St-Zip: NORCROSS, GA 30093 US City-St-Zip:

Title: Title: () Delete () Change () Addition

MCNAMARA, KEVIN Name: Name: C/O 1854 SHACKLEFORD COURT.#200 Address: Address: City-St-Zip: NORCROSS, GA 30093 US City-St-Zip:

Title: PC00 (X) Delete Title: () Change () Addition

HAM, NANCY J Name: Name: 2555 DAVIE ROAD #110 Address: Address: City-St-Zip: City-St-Zip: FORT LAUDERDALE, FL 33317

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: DAVID E. OLES SEC 10/11/2005