2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L06046

City-St-Zip:

Entity Name: PROXYMED, INC.

FILED Apr 03, 2007 Secretary of State

That is the second of the seco					
Current Principal Place of Business:			New Princ	New Principal Place of Business:	
	CKLEFORD C SS, GA 30093	OURT SUITE 200 US			
Current Mailing Address:			New Maili	New Mailing Address:	
1854 SHACKLEFORD COURT SUITE 200 NORCROSS, GA 30093 US					
FEI Number: 65-0202059 FEI Number Applied For ()			FEI Number Not Appl	El Number Not Applicable () Certificate of Status Desired ()	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
11380 PRO		NS NEWORK INC. RMS ROAD #221E S, FL 33410 US			
	named entity of Florida.	submits this statement for the p	urpose of changing i	ts registered office or registered agent, or both,	
SIGNATUR	RE:				
Electronic Signature of Registered Agent Date					
Election Can	npaign Financin	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	LETTKO, JOHN	EFORD COURT,#200	Title: Name: Address: City-St-Zip:	CEOD (X) Change () Addition LETTKO, JOHN G 1854 SHACKLEFORD COURT,#200 NORCROSS, GA 30093 US	
Title: Name: Address: City-St-Zip:	O'DOWD, DOL	EFORD COURT,#200	Title: Name: Address: City-St-Zip:	CFO (X) Change () Addition HAYDEN, GERARD 1854 SHACKLEFORD COURT,#200 NORCROSS, GA 30093 US	
Title: Name: Address: City-St-Zip:	OLES, DAVID	EFORD COURT,#200	Title: Name: Address: City-St-Zip:	S (X) Change () Addition FLEMING, PETER E III 1854 SHACKLEFORD COURT,#200 NORCROSS, GA 30093 US	
Title: Name: Address: City-St-Zip:	COOPERMAN,	CKLEFORD COURT,#200	Title: Name: Address: City-St-Zip:	D (X) Change () Addition SCHWARTZ, SAM 1854 SHACKLEFORD COURT,#200 NORCROSS, GA 30093 US	
Title: Name: Address: City-St-Zip:	MCNAMARA, K	CKLEFORD COURT,#200	Title: Name: Address: City-St-Zip:	D (X) Change () Addition COOPERMAN, EDWIN 1854 SHACKLEFORD COURT,#200 NORCROSS, GA 30093 US	
Title: Name: Address:	() Delete	Title: Name: Address:	D () Change (X) Addition TERRY, EUGENE 1854 SHACKLEFORD COURT,#200	

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 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.

City-St-Zip:

NORCROSS, GA 30093

SIGNATURE: BY Y.HUBERDEAU AS ATTORNEY-IN-FACT CEO 04/03/2007