

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000069048

FILED
Apr 28, 2009
Secretary of State

Entity Name: OPTIMUM MEDICAL BILLING & RECOVERY, LLC

Current Principal Place of Business:

180 PARK AVENUE NORTH
SUITE 2A
WINTER PARK, FL 32789

New Principal Place of Business:

Current Mailing Address:

180 PARK AVENUE NORTH
SUITE 2A
WINTER PARK, FL 32789

New Mailing Address:

FEI Number: 26-3039557

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BYRD, JEANNETTE R
1770 SPRUCE AVENUE
WINTER PARK, FL 32789 US

Name and Address of New Registered Agent:

JK PARK, LLC
180 PARK AVENUE NORTH
SUITE 2A
WINTER PARK, FL 32789 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: KATHY MCCOY

04/28/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: BYRD, JEANNETTE R
Address: 1770 SPRUCE AVENUE
City-St-Zip: WINTER PARK, FL 32789

Title: MGRM (X) Delete
Name: MCCOY, KATHY
Address: 4235 QUANDO DRIVE
City-St-Zip: ORLANDO, FL 32812

Title: MGRM () Delete
Name: MORGAN, PATRICIA
Address: 611 GAINES WAY
City-St-Zip: WINTER PARK, FL 32789

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: JK PARK, LLC
Address: 180 PARK AVENUE N. SUITE 2A
City-St-Zip: WINTER PARK, FL 32789

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

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

I hereby certify that the information supplied with this filing does not qualify 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: KATHY MCCOY

MGRM

04/28/2009

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