

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000082168

FILED
Apr 29, 2009
Secretary of State

Entity Name: ACI PROGRESSIVE BILLING SOLUTIONS, LLC

Current Principal Place of Business:

2605 W ATLANTIC AVE
STE D-102
DELRAY BEACH, FL 33445

New Principal Place of Business:

Current Mailing Address:

2605 W ATLANTIC AVE
STE D-102
DELRAY BEACH, FL 33445

New Mailing Address:

FEI Number: 26-3315062 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ACEVEDO, CHRISTOPHER
2455 LINDELL BLVD
DELRAY BEACH, FL 33445 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: ACEVEDO, JEAN
Address: 711 GOLF CT
City-St-Zip: DELRAY BEACH, FL 33445

Title: MGRM () Delete
Name: ACEVEDO, CHRISTOPHER P
Address: 2455 LINDELL BLVD
City-St-Zip: DELRAY BEACH, FL 33444

ADDITIONS/CHANGES:

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: CHRISTOPHER P. ACEVEDO MGRM 04/29/2009

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