

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000115430

FILED
Jun 30, 2009
Secretary of State

Entity Name: PROVIDER'S CHOICE MEDICAL BILLING, LLC

Current Principal Place of Business:

1342 COLONIAL BLVD BLDG. E, SUITE 33
FORT MYERS, FL 33907

New Principal Place of Business:

Current Mailing Address:

1342 COLONIAL BLVD BLDG. E, SUITE 33
FORT MYERS, FL 33907

New Mailing Address:

FEI Number: 26-3910042 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

BUSINESS FILINGS INCORPORATED
1203 GOVERNOR'S SQUARE BLVD
SUITE 101
TALLAHASSEE, FL 323012960 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: _____

Electronic Signature of Registered Agent

_____ Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: BATES, RONALD
Address: 3451 NE 10TH AVE.
City-St-Zip: CAPE CORAL, FL 33909

Title: MGRM () Delete
Name: BATES, FRANCES
Address: 1184 SCHAUER CT.
City-St-Zip: WALNUT GROVE, CA 95690

Title: MGRM () Delete
Name: BATES, JIMMIE
Address: 1184 SCHAUER CT.
City-St-Zip: WALNUT GROVE, CA 95690

ADDITIONS/CHANGES:

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

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: RONALD D BATES

MR

06/30/2009

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