

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000087944

FILED
Jan 05, 2012
Secretary of State

Entity Name: PACE MEDICAL BILLING SOLUTIONS, LLC

Current Principal Place of Business:

528 MODIGLIANI DRIVE
NOKOMIS, FL 34275

New Principal Place of Business:

Current Mailing Address:

PO BOX 244
OSPREY, FL 34229

New Mailing Address:

FEI Number: 27-5232498

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PELLETIER, THERESA I
528 MODIGLIANI DR
NOKOMIS, FL 34275 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: MGR
Name: PELLETIER, THERESA I
Address: 528 MODIGLIANI DR
City-St-Zip: NOKOMIS, FL 34275

I hereby 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: THERESA I PELLETIER

MGR

01/05/2012

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