2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 23, 2009
Secretary of State

DOCUMENT# P01000016147

Entity Name: QUALITY FIRST HEALTHCARE CONSULTING, INC.

Current Principal Place of Business:

6790 SPRING LAKE RD.
KEYSTONE HGTS, FL 32656

New Principal Place of Business:

12625 NE 204TH TER
WALDO, FL 32694

Current Mailing Address:

6790 SPRING LAKE RD
KEYSTONE HGTS, FL 32656

New Mailing Address:

12625 NE 204TH TER
WALDO, FL 32694

FEI Number: 59-3708162 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CHITTY, CANDACE J PRES
6790 SPRING LAKE RD
KEYSTONE HGTS, FL 32656 US

Name and Address of New Registered Agent:

CHITTY, CANDACE J PRES
12625 NE 204TH TER
WALDO, FL 32694 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: 03/23/2009
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PRES ( ) Delete
Name: CHITTY, CANDACE J PRES
Address: 6790 SPRING LAKE RD
City-St-Zip: KEYSTONE HGTS, FL 32656

Title: VP ( ) Delete
Name: CHITTY, RANDAL F VP
Address: 6790 SPRING LAKE RD
City-St-Zip: KEYSTONE HGTS, FL 32656

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change ( ) Addition
Name: CHITTY, CANDACE J PRES
Address: 12625 NE 204TH TER
City-St-Zip: WALDO, FL 32694

Title: VP (X) Change ( ) Addition
Name: CHITTY, RANDAL F VP
Address: 12625 NE 204TH TER
City-St-Zip: WALDO, FL 32694

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 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.

SIGNATURE: RANDAL F. CHITTY VP 03/23/2009
Electronic Signature of Signing Officer or Director — Date