

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P01000034107

1. Entity Name

INTEGRITY MEDICAL BILLING, INC.

Principal Place of Business

6577 FOX CREST LN
LAKELAND FL 33813

Mailing Address

6577 FOX CREST LN
LAKELAND FL 33813

2. Principal Place of Business

5645 Sunneland Hills Cir
Suite, Apt. #, etc.

3. Mailing Address

4798 S. Florida Ave
Suite, Apt. #, etc.

323

City & State

LAKELAND FL

City & State

LAKELAND, FL

Zip

33813

Country

USA

Zip

33813-2181

Country

USA

4. FEI Number

59-3711080

Applied For

Not Applicable

6. Name and Address of Current Registered Agent

GRAYCE BUNCH, KRISTINA

6577 FOX CREST LN
LAKELAND FL 33813

Name

Kristina Grayce Bunch

Street Address (P.O. Box Number is Not Acceptable)

4798 S. Florida Ave

323

City

LAKELAND

FL

Zip Code

33813-2181

7. Name and Address of New Registered Agent

8. 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 Kristina G. Bunch Kristina G. Bunch | President Owner 4/15/02

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.
(See criteria on back)

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution.

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

CR2E034 (9/01)

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GRAYCE BUNCH, KRISTINA 6577 FOX CREST LN LAKELAND FL 33813	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Kristina Grayce Bunch 5645 Sunneland Hills Cir LAKELAND, FL 33813	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	V William Wayne Bunch 5645 Sunneland Hills Cir LAKELAND, FL 33813	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Kristina Bunch Kristina Bunch | President 4/15/02 863-644-2552

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #