## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P02000114197

Entity Name: MEDICAL DEFENSE SOLUTIONS, INC.

FILED Aug 17, 2007 Secretary of State

Current Principal Place of Busi	ness: New	Principal Place of Bus	siness:
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62 SE 6TH AVE. 54 SE 6TH AVE.

DELRAY BEACH, FL 33483 DELRAY BEACH, FL 33483

Current Mailing Address: New Mailing Address:

62 SE 6TH AVE. 54 SE 6TH AVE

DELRAY BEACH, FL 33483 DELRAY BEACH, FL 33483

FEI Number: 04-3724162 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

DANNA, JULIE GRACEY, MATTHEW 62 SE 6TH AVE. 54 SE 6TH AVE.

DELRAY BEACH, FL 33483 US DELRAY BEACH, FL 33483 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: MATT GRACEY 08/17/2007

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P ( ) Delete Title: PRES (X) Change ( ) Addition Name: DANNA, JULIE Name: GRACEY, MATT

Address: 62 SE 6TH AVE Address: 54 SE 6TH AVE

City-St-Zip: DELRAY BEACH, FL 33483 City-St-Zip: DELRAY BEACH, FL 33483 US

Title: ( ) Delete Title: VP ( ) Change (X) Addition Name: MURPHY. THOMAS

Address: Address: 54 SE SIXTH AVE

City-St-Zip: City-St-Zip: DELRAY BEACH, FL 33483 US

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: ELAINE STUART AE 08/17/2007