## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P06000128330

Entity Name: OPTIMED BILLING SOLUTIONS, INC.

FILED Jan 08, 2009 Secretary of State

Current Principal Place of Business:  8492 SOUTH TAMIAMI TRAIL  SARASOTA, FL 34238  Current Mailing Address:		New Principal Place of	New Principal Place of Business:	
		5342 CLARK RD. SUITE 166 SARASOTA, FL 34233 New Mailing Address:	US	
5342 CLARK RD. # 166 SARASOTA, FL 34233		5342 CLARK RD. SUITE 166 SARASOTA, FL 34233	US	
FEI Number: 20-5690998	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:		Name and Address of N	Name and Address of New Registered Agent:	
KING, CLIFFORD M 1990 MAIN ST. SARASOTA, FL 34236	US			
The above named entity in the State of Florida.	submits this statement for the p	purpose of changing its registered c	office or registered agent, or both,	
SIGNATURE:				
Electronic Signature of Registered Agent		ent	Date	
Election Campaign Financing	g Trust Fund Contribution ( ).			
OFFICERS AND DIRECTORS:		ADDITIONS/CHANGES	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	

Title: DPST Title: ( ) Delete () Change () Addition CAREY, JAMES M Name: Name: Address: 5342 CLARK RD #166 Address: City-St-Zip: SARASOTA, FL 34233 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 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: JAMES M. CAREY **DPST** 01/08/2009