

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000089289

FILED  
Apr 11, 2012  
Secretary of State

**Entity Name:** CREDENTIALING MANAGEMENT SERVICES, INC (CMS)

**Current Principal Place of Business:**

609 NW 30TH COURT  
WILTON MANORS, FL 33311 17

**New Principal Place of Business:**

609 NW 30TH COURT  
WILTON MANORS, FL 33311

**Current Mailing Address:**

609 NW 30TH COURT  
WILTON MANORS, FL 33311 17

**New Mailing Address:**

609 NW 30TH COURT  
WILTON MANORS, FL 33311

**FEI Number:** 26-3432553

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BURKE, LAURA  
609 NW 30TH COURT  
WILTON MANORS, FL 333111719 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

**OFFICERS AND DIRECTORS:**

Title: DIR  
Name: BURKE, LAURA B  
Address: 609 NW 30TH COURT  
City-St-Zip: WILTON MANORS, FL 33311

Title: PD  
Name: BURKE, BRADLEY K  
Address: 609 NW 30TH COURT  
City-St-Zip: WILTON MANORS, FL 33311

I hereby 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 all other like empowered.

SIGNATURE: LAURA BURKE

DIR

04/11/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date