2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P11000042914

Entity Name: MEDICAL BILLING SPECIALISTS OF NW, FL, INC

FILED May 01, 2012 Secretary of State

| Current Principa | al Place of Business: | New Principal Place of Business: |
|------------------|-----------------------|----------------------------------|
| | | |

9009 UNIVERSITY PARKWAY 9009 UNIVERSITY PARKWAY

UNIT 176 UNIT 176

PENSACOLA, FL 32514 PENSACOLA, FL 32514 US

Current Mailing Address: New Mailing Address:

9009 UNIVERSITY PARKWAY 9009 UNIVERSITY PARKWAY UNIT 176 UNIT 176

PENSACOLA, FL 32514 PENSACOLA, FL 32514 US

FEI Number: 45-2068495 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:

BURKE, JOSEPHINE M 9009 UNIVERSITY PARKWAY UNIT 176 PENSACOLA, FL 32514 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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P.ST

Name: BURKE, JOSEPHINE M

Address: 9009 UNIVERSITY PARKWAY UNIT 176

City-St-Zip: PENSACOLA, FL 32514

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: JOSEPHINE M. BURKE P ST 05/01/2012