

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P11000070104

FILED
Apr 30, 2012
Secretary of State

Entity Name: RN MEDICAL TRANSCRIPTION AND EDITING, INC.

Current Principal Place of Business:

19431 DEVONWOOD CIR.
FORT MYERS, FL 33967

New Principal Place of Business:

Current Mailing Address:

19431 DEVONWOOD CIR.
FORT MYERS, FL 33967 US

New Mailing Address:

19431 DEVONWOOD CIR.
FORT MYERS, FL 33967

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STOWERS, APRIL
19431 DEVONWOOD CIR.
FORT MYERS, FL 33967 US

Name and Address of New Registered Agent:

STOWERS, APRIL S
19431 DEVONWOOD CIR.
FORT MYERS, FL 33967 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: APRIL S. STOWERS

Electronic Signature of Registered Agent

04/30/2012

Date

OFFICERS AND DIRECTORS:

Title: P
Name: STOWERS, APRIL S
Address: 19431 DEVONWOOD CIR.
City-St-Zip: FORT MYERS, FL 33967 US

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: APRIL S. STOWERS

Electronic Signature of Signing Officer or Director

P

04/30/2012

Date