

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000021334

FILED  
Aug 29, 2007  
Secretary of State

Entity Name: PHYSICIAN'S ACCOUNT MANAGER, INCORPORATED

## Current Principal Place of Business:

4000 ST JOHN AVE  
STE 13A  
JACKSONVILLE, FL 32205 US

## New Principal Place of Business:

## Current Mailing Address:

4000 ST JOHNS AVE  
STE 13A  
JACKSONVILLE, FL 32205 US

## New Mailing Address:

FEI Number: 59-3168901      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

BARAKAT, PAUL H  
4000 ST JOHNS AVE  
STE 13A  
JACKSONVILLE, FL 32205 US

## Name and Address of New Registered Agent:

CRAWFORD, JOHN R  
1200 RIVERPLACE BOULEVARD  
SUITE 800  
JACKSONVILLE, FL 32207 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: JOHN R. CRAWFORD

08/29/2007

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:

Title: D ( ) Delete  
Name: BARAKAT, PAUL H  
Address: 4000 ST JOHNS AVE STE 13A  
City-St-Zip: JACKSONVILLE, FL

Title: CEOT ( ) Delete  
Name: BARAKAT, BRIGETTE  
Address: 4000 ST JOHN AVE STE 13A  
City-St-Zip: JACKSONVILLE, FL 32205 US

Title: SD (X) Delete  
Name: BARAKAT, BRIGETTE  
Address: 4000 ST JOHN AVE STE 13A  
City-St-Zip: JACKSONVILLE, FL 32205 US

Title: P (X) Delete  
Name: BARAKAT, HAISSAM  
Address: 4000 ST JOHN AVE STE 13A  
City-St-Zip: JACKSONVILLE, FL 32205 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DCEO (X) Change ( ) Addition  
Name: BARAKAT, BRIGETTE  
Address: 4000 ST JOHNS AVE STE 13A  
City-St-Zip: JACKSONVILLE, FL 32205

Title: P (X) Change ( ) Addition  
Name: BARAKAT, HAISSAM  
Address: 4000 ST JOHN AVE STE 13A  
City-St-Zip: JACKSONVILLE, FL 32205 US

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
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: BRIGETTE BARAKAT

CEO

08/29/2007

Electronic Signature of Signing Officer or Director

Date