

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P93000039866

FILED
Sep 05, 2002
Secretary of State

Entity Name: ELECTRONIC CLAIMS PROCESSING SYSTEMS AND SERVICES, INC.

Current Principal Place of Business:

4801 HEATHE DR
TALLAHASSEE, FL 32308 US

New Principal Place of Business:

4801 HEATHE DR
TALLAHASSEE, FL 32309 US

Current Mailing Address:

P O BOX 13972
TALLAHASSEE, FL 32317 US

New Mailing Address:

FEI Number: 59-3196744 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

O'KELLEY, ROBERT R
4801 HEATHE DR
TALLAHASSEE, FL 32308 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

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: AMOS, HAYS M
Address: 4801 HEATHE DR
City-St-Zip: TALLAHASSEE, FL 32308

Title: S () Delete
Name: AMOS, PATRICIA
Address: 4801 HEATHE DR
City-St-Zip: TALLAHASSEE, FL

Title: D () Delete
Name: O'KELLEY, ROBERT R
Address: 2190 VICTORY GARDEN LN.
City-St-Zip: TALLAHASSEE, FL 32308

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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 for the exemption stated in Section 119.07(3)(i), 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: ROBERT R. O'KELLEY

Electronic Signature of Signing Officer or Director

OWNE

09/05/2002

Date