

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000049744

FILED
Jan 05, 2012
Secretary of State

Entity Name: PROVIDER REIMBURSEMENT INC.

Current Principal Place of Business:

257 BRIARWOOD LANE
PONTE VEDRA BEACH, FL 32082

New Principal Place of Business:

Current Mailing Address:

P. O. BOX 2404
PONTE VEDRA BEACH, FL 320042404 US

New Mailing Address:

FEI Number: 59-3205294

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LONG, MATTHEW J
257 BRIARWOOD LANE
PONTE VEDRA BEACH, FL 32082 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: PC
Name: LONG, MATTHEW J.
Address: 257 BRIARWOOD LANE
City-St-Zip: PONTE VEDRA BCH., FL

Title: ST
Name: LONG, GRACE
Address: 257 BRIARWOOD LANE
City-St-Zip: PONTE VEDRA BCH., FL

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: MATTHEW J LONG

PRES

01/05/2012

Electronic Signature of Signing Officer or Director

Date