

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000018156

FILED
Mar 04, 2009
Secretary of State

Entity Name: MEDLOCK'S BILLING SERVICE, INC.

Current Principal Place of Business:

3876 SR 16 W
PENNEY FARMS, FL 32079

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 979
PENNEY FARMS, FL 32079

New Mailing Address:

FEI Number: 59-3227887

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

THARP, ANDREA G
3876 HIGHWAY 16 WEST
PENNEY FARMS, FL 32079 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DPT () Delete
Name: THARP, ANDREA G
Address: 3876 HIGHWAY 16 WEST
City-St-Zip: PENNEY FARMS, FL

Title: DS () Delete
Name: THARP, ANTHONY R
Address: 3876 HIGHWAY 16 WEST
City-St-Zip: PENNEY FARMS, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: ANDREA GAIL THARP

DPT

03/04/2009

Electronic Signature of Signing Officer or Director

Date