

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000038744

FILED
Feb 19, 2007
Secretary of State

Entity Name: THE BOTTOM LINE MEDICAL ADMINISTRATIVE CONSULTANTS, INC.

Current Principal Place of Business:

3320 BOBCAT TRAIL
TIGER CREEK FOREST
LAKE WALES, FL 33898 US

New Principal Place of Business:

385 N.E. GOLD DUST ROAD
BRANFORD, FL 32008 US

Current Mailing Address:

3320 BOBCAT TRAIL
TIGER CREEK FOREST
LAKE WALES, FL 33898 US

New Mailing Address:

385 N.E. GOLD DUST ROAD
BRANFORD, FL 32008 US

FEI Number: 59-3391034

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ECKIS, KRISTINE D
3320 BOBCAT TRAIL
TIGER CREEK FOREST
LAKE WALES, FL 33898 US

Name and Address of New Registered Agent:

ECKIS, KRISTINE D
385 N.E. GOLD DUST ROAD
BRANFORD, FL 32008 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:

02/19/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PVSD () Delete
Name: ECKIS, KRISTINE D
Address: 3320 BOBCAT TRAIL, TIGER CREEK FOREST
City-St-Zip: LAKE WALES, FL 33898

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PVSD (X) Change () Addition
Name: ECKIS, KRISTINE D
Address: 385 N.E. GOLD DUST ROAD
City-St-Zip: BRANFORD, FL 32008

I hereby certify that the information supplied with this filing does not qualify for the 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: KRISTINE D. ECKIS

PVSD

02/19/2007

Electronic Signature of Signing Officer or Director

Date