2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 19, 2009
Secretary of State

DOCUMENT# P97000061605

Entity Name: PROFESSIONAL TRANSCRIPTIONS OF NORTHWEST FLORIDA, INC.

Current Principal Place of Business:

1310 DUNMIRE STE B
PENSACOLA, FL 32504

New Principal Place of Business:

1310 DUNMIRE ST.
SUITE B
PENSACOLA, FL 32504

Current Mailing Address:

1310 DUNMIRE STE B
PENSACOLA, FL 32504

New Mailing Address:

1310 DUNMIRE ST.
SUITE B
PENSACOLA, FL 32504

FEI Number: 59-3461087 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

NELSON, JEANNETTE
3610 MISTY WOODS CIRCLE
PACE, FL 32571 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: P ( ) Delete
Name: NELSON, JEANNETTE
Address: 3610 MISTY WOODS CIR
City-St-Zip: PACE, FL 32571

Title: V ( ) Delete
Name: FREEL, KATHERINE
Address: 2956 HWY 178
City-St-Zip: JAY, FL 32565

Title: V ( ) Delete
Name: SAXTON, JACK
Address: 5927 GREENFIELD ST
City-St-Zip: PACE, FL 32571

Title: S ( ) Delete
Name: FREEL, TIM
Address: 2956 HWY 178
City-St-Zip: JAY, FL 32565

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:

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: JEANNETTE NELSON P 03/19/2009

Electronic Signature of Signing Officer or Director — Date