

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000085234

FILED
Jul 26, 2007
Secretary of State

Entity Name: MEDICAL SPECIALTY SOFTWARE, INC.

Current Principal Place of Business:

1660 GRANDVIEW
KISSIMMEE, FL 34744 US

New Principal Place of Business:

Current Mailing Address:

1660 GRANDVIEW
KISSIMMEE, FL 34744 US

New Mailing Address:

1660 GRANDVIEW BLVD
KISSIMMEE, FL 34744 US

FEI Number: 59-3473892

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RALSTON, STEPHEN
1660 GRANDVIEW
KISSIMMEE, FL 34744 US

Name and Address of New Registered Agent:

RALSTON, STEPHEN
1660 GRANDVIEW BLVD
KISSIMMEE, FL 34744 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: STEPHEN M RALSTON

07/26/2007

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PS () Delete
Name: RALSTON, STEPHEN M
Address: P.O. BOX 423189
City-St-Zip: KISSIMMEE, FL 347423189

Title: D () Delete
Name: VALENTINE, DEBRA
Address: P.O. BOX 423189
City-St-Zip: KISSIMMEE, FL 347423189

Title: D (X) Delete
Name: JENKINS, MICHAEL B
Address: P.O. BOX 423189
City-St-Zip: KISSIMMEE, FL 347423189

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change () Addition
Name: JENKINS, MICHAEL B
Address: P.O. BOX 423189
City-St-Zip: KISSIMMEE, FL 347423189

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: STEPHEN M RALSTON

P

07/26/2007

Electronic Signature of Signing Officer or Director

Date