## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000045032

Entity Name: MEDICAL ELECTRONIC CLAIMS, INC.

FILED Jul 06, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

2447 N WICKHAM ROAD 5036 DR. PHILLIPS BOULEVARD

SUITE 138 ORLANDO,, FL 32819 MELBOURNE, FL 32935

Current Mailing Address: New Mailing Address:

2447 N WICKHAM ROAD PO BOX #184

SUITE 138 ORLANDO, FL 32819 MELBOURNE, FL 32935

FEI Number: 51-0341174 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

DAY, MARIE E
785 HAWSER STREET NE
PALM BAY, FL 32907 US
HARRY, GULLIFORD
5036 DR. PHILLIPS BOULEVARD
ORLANDO, FL 32819 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: HARRY GULLIFORD 07/06/2005

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTD () Delete Title: PTD (X) Change () Addition
Name: DAY, PAUL H Name: ACCESS NORTH AMERICA, , LLC
Address: 785 HAWSER STREET NE Address: 5036 DR PHILLIPS ROLL EVARD

Address: 785 HAWSER STREET NE Address: 5036 DR. PHILLIPS BOULEVARD City-St-Zip: PALM BAY, FL 32907 City-St-Zip: ORLANDO, FL 32819

Title: VSD ( ) Delete Title: DIR (X) Change ( ) Addition Name: DAY. PAUL H Name: HARRY. GULLIFORD

Address: 785 HAWSER STREET NE Address: 5036 DR. PHILLIPS BOULEVARD

City-St-Zip: PALM BAY, FL 32907 City-St-Zip: ORLANDO, FL 32819

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: HARRY GULLIFORD PRES 07/06/2005