

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P98000092727

1. Corporation Name

SPECIALTY BILLING & OFFICE SERVICES, INC.

Principal Place of Business

860 SOUTH VILLAGE DRIVE, NO. 105
ST. PETERSBURG FL 33716

Mailing Address

860 SOUTH VILLAGE DRIVE, NO. 105
ST. PETERSBURG FL 33716

2. Principal Place of Business

21 1811 Stonebrook Lane

Suite, Apt. #, etc.

2a. Mailing Address

26 PO Box 7605

Suite, Apt. #, etc.

22

City & State

23 Safety Harbor FL

Zip

24 34695

Country

USA

27 City & State

28 ST Petersburg FL

Zip

29 33734

Country

USA

30

9. Name and Address of Current Registered Agent

PEQUIGNOT, MARGOT
164 8TH AVENUE S.W.
LARGO FL 33770

81

Name

LACHER MC DONALD & CO, CPA's ATTN Carl Lacher

82

Street Address (P.O. Box Number is Not Acceptable)

566 SEMINOLE Blvd

83

84

City

SEMINOLE

85

Zip Code

33772

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Kathy J. (Signature)

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

8/13/99

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PD	<input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GORDON, KATHY J		1.2 NAME	
STREET ADDRESS	860 SOUTH VILLAGE DRIVE, NO. 105		1.3 STREET ADDRESS	
CITY-ST-ZIP	ST. PETERSBURG FL 33716		1.4 CITY-ST-ZIP	
TITLE		<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			2.2 NAME	
STREET ADDRESS			2.3 STREET ADDRESS	
CITY-ST-ZIP			2.4 CITY-ST-ZIP	
TITLE		<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			3.2 NAME	
STREET ADDRESS			3.3 STREET ADDRESS	
CITY-ST-ZIP			3.4. CITY-ST-ZIP	
TITLE		<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			4.2 NAME	
STREET ADDRESS			4.3 STREET ADDRESS	
CITY-ST-ZIP			4.4 CITY-ST-ZIP	
TITLE		<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			5.2 NAME	
STREET ADDRESS			5.3 STREET ADDRESS	
CITY-ST-ZIP			5.4 CITY-ST-ZIP	
TITLE		<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			6.2 NAME	
STREET ADDRESS			6.3 STREET ADDRESS	
CITY-ST-ZIP			6.4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Kathy J. Lacher*

NATURE REQUIRED

SIGNATURE AND TITLE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

062-
727-438-4529

8/13/99 Daytime Phone #

0411681

CR2E034 (11/98)

1498000092727
608053-90012-6

Specialty Billing & Office Services, Inc.
860 S. Village Drive #105
St. Petersburg, FL 33716

August 13, 1999

Florida Department Of State
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

To whom It May Concern:

Per my conversation with your office today, due to the fact that I am having problems with receiving my mail in a timely fashion, I did not receive my FIRST notification of Corporate filing until yesterday. Please accept my report packet along with my check for \$150 as instructed.

Thank you for your assistance.

Sincerely yours,



Kathy J. Gordon
President