

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P99000020986

FILED
May 01, 2003
Secretary of State

Entity Name: MEDICAL LICENSING CONSULTANTS, INC.

Current Principal Place of Business:

2750 OLD ST AUGUSTINE RD
C24
TALLAHASSEE, FL 32301

New Principal Place of Business:

1029 CARRIN DRIVE
TALLAHASSEE, FL 32311

Current Mailing Address:

2750 OLD ST AUGUSTINE RD
C24
TALLAHASSEE, FL 32301

New Mailing Address:

1029 CARRIN DRIVE
TALLAHASSEE, FL 32311

FEI Number: 59-3586850

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BUTLER, KELLIE
1701 ATKAMIRE DRIVE
TALLAHASSEE, FL 32304 US

Name and Address of New Registered Agent:

BUTLER, KELLIE
1029 CARRIN DRIVE
TALLAHASSEE, FL 32311 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:

05/01/2003

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ()

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: BUTLER, KELLIE
Address: 2750 OLD ST AUGUSTINE RD #C24
City-St-Zip: TALLAHASSEE, FL 32301

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: BUTLER, KELLIE
Address: 1029 CARRIN DRIVE
City-St-Zip: TALLAHASSEE, FL 32311

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: KELLIE BUTLER

P

05/01/2003

Electronic Signature of Signing Officer or Director

Date