

2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P99000045259

FILED
Oct 16, 2009
Secretary of State

Entity Name: PEACOCK TRANSCRIPTION SOLUTIONS, INC.

Current Principal Place of Business:

2155 ART MUSEUM DRIVE
JACKSONVILLE, FL 32207

New Principal Place of Business:

5730 BOWDEN ROAD
102
JACKSONVILLE, FL 32216

Current Mailing Address:

7701 LAS PALMAS WAY
JACKSONVILLE, FL 32256

New Mailing Address:

FEI Number: 59-3572942

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SMALL BUSINESS ASS. INC
4070 HERSCHEL ST
JACKSONVILLE, FL 32210 US

Name and Address of New Registered Agent:

PEACOCK, JUDITH E
7701 LAS PALMAS WAY
JACKSONVILLE, FL 32256 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: JUDITH PEACOCK

10/16/2009

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: P () Delete
Name: PEACOCK, JUDITH
Address: 7701 LAS PALMAS WAY
City-St-Zip: JACKSONVILLE, FL 32256

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: JUDITH PEACOCK

PRES

10/16/2009

Electronic Signature of Signing Officer or Director

Date