

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000059110

FILED
Apr 27, 2006
Secretary of State

Entity Name: AMERICAN MEDICAL REVIEW OFFICER, INC.

Current Principal Place of Business:

4237 SALISBURY RD
STE 312
JACKSONVILLE, FL 32216 US

New Principal Place of Business:

Current Mailing Address:

4237 SALISBURY RD
STE 312
JACKSONVILLE, FL 32216 US

New Mailing Address:

FEI Number: 59-3586831

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FREEDMAN, JANE D
4237 SALISBURY RD
SUITE 312
JACKSONVILLE, FL 32216 US

Name and Address of New Registered Agent:

GRIFFIN, LINDA R
4237 SALISBURY RD
SUITE 312
JACKSONVILLE, FL 32216 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: LINDA R GRIFFIN

04/27/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PS () Delete
Name: FREEDMAN, JANE D
Address: 4237 SALISBURY RD #300
City-St-Zip: JACKSONVILLE, FL 32216 US

Title: V () Delete
Name: FREEDMAN, DONALD S
Address: 4237 SALISBURY RD #300
City-St-Zip: JACKSONVILLE, FL 32216 US

Title: VT () Delete
Name: GRIFFIN, LINDA ROSE
Address: 4237 SALISBURY RD #300
City-St-Zip: JACKSONVILLE, FL 32216 US

Title: V () Delete
Name: GRIFFIN, ROY D
Address: 4237 SALISBURY RD #300
City-St-Zip: JACKSONVILLE, FL 32216 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PS (X) Change () Addition
Name: FREEDMAN, JANE D
Address: 4237 SALISBURY RD #312
City-St-Zip: JACKSONVILLE, FL 32216 US

Title: V (X) Change () Addition
Name: FREEDMAN, DONALD S
Address: 4237 SALISBURY RD #312
City-St-Zip: JACKSONVILLE, FL 32216 US

Title: VT (X) Change () Addition
Name: GRIFFIN, LINDA ROSE
Address: 4237 SALISBURY RD #312
City-St-Zip: JACKSONVILLE, FL 32216 US

Title: V (X) Change () Addition
Name: GRIFFIN, ROY D
Address: 4237 SALISBURY RD #312
City-St-Zip: JACKSONVILLE, FL 32216 US

I hereby certify that the information supplied with this filing does not qualify for the 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: LINDA ROSE GRIFFIN

V P

04/27/2006

Electronic Signature of Signing Officer or Director

Date