

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S77838

FILED
Jan 24, 2006
Secretary of State

Entity Name: MEDICAL AUDIT & RESOURCE SERVICES, INC.

Current Principal Place of Business:

15050 N HWY 441
EUSTIS, FL 32726 US

New Principal Place of Business:

1100 EAST ALFRED STREET
TAVARES, FL 32778 US

Current Mailing Address:

PO BOX 1327
EUSTIS, FL 32727 US

New Mailing Address:

FEI Number: 59-3262521 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

HUSTY, TODD M DO
15050 HWY 441
EUSTIS, FL 32726 US

Name and Address of New Registered Agent:

HUSTY, TODD M DO
1100 EAST ALFRED STREET
TAVARES, FL 32778 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:

Electronic Signature of Registered Agent

01/24/2006

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: HUSTY, TODD M
Address: 5690 S. LAKE BURKETT LANE
City-St-Zip: WINTER PARK, FL 32792

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 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: TODD M. HUSTY, DO

Electronic Signature of Signing Officer or Director

P

01/24/2006

Date