

2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000168192

Entity Name: MEDICAL BILLING COMPLIANCE, LLC

Current Principal Place of Business:

5380 GULF OF MEXICO DRIVE
SUITE 105
LONGBOAT KEY, FL 34228

Current Mailing Address:

5380 GULF OF MEXICO DRIVE
SUITE 105
LONGBOAT KEY, FL 34228

FEI Number: 46-4241049

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

ZIKA, RYAN W
5380 GULF OF MEXICO DRIVE
SUITE 105
LONGBOAT KEY, FL 34228 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

Date

Authorized Person(s) Detail :

Title MGRM
Name CHEW, MARILYN
Address 5380 GULF OF MEXICO DRIVE
SUITE 105
City-State-Zip: LONGBOAT KEY FL 34228

Title AUTHORIZED MEMBER
Name CHEW, EDMUND F III
Address 5380 GULF OF MEXICO DRIVE
SUITE 105
City-State-Zip: LONGBOAT KEY FL 34228

I hereby 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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: MARILYN CHEW

MGRM

01/17/2014

Electronic Signature of Signing Authorized Person(s) Detail

Date