

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F00000003368

FILED  
Apr 03, 2009  
Secretary of State

Entity Name: HBS BILLING SERVICES COMPANY

**Current Principal Place of Business:**

7411 JOHN SMITH DR  
SUITE 1500  
SAN ANTONIO, TX 78229 US

**New Principal Place of Business:**

**Current Mailing Address:**

7411 JOHN SMITH DR  
SUITE 1500  
SAN ANTONIO, TX 78229 US

**New Mailing Address:**

FEI Number: 74-2951759      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 US

**Name and Address of New Registered Agent:**

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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: ISHAM, JR, ROBERT T  
Address: 7411 JOHN SMITH DRIVE, SUITE 1500  
City-St-Zip: SAN ANTONIO, TX 78229

Title: D ( ) Delete  
Name: RATCHFORD, THOMAS C  
Address: 7411 JOHN SMITH DRIVE, SUITE 1500  
City-St-Zip: SAN ANTONIO, TX 78229

Title: P ( ) Delete  
Name: CARTER, GREG M  
Address: 7411 JOHN SMITH DRIVE, SUITE 1500  
City-St-Zip: SAN ANTONIO, TX 78229

Title: TD ( ) Delete  
Name: PHIPPS, NORMAN M  
Address: 7411 JOHN SMITH DRIVE, SUITE 1500  
City-St-Zip: SAN ANTONIO, TX 78229

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: S (X) Change ( ) Addition  
Name: CUBETA, KELLI  
Address: 7411 JOHN SMITH DRIVE, SUITE 1500  
City-St-Zip: SAN ANTONIO, TX 78229

Title: VP (X) Change ( ) Addition  
Name: SMITH, CHRISTOPHER  
Address: 7411 JOHN SMITH DRIVE, SUITE 1500  
City-St-Zip: SAN ANTONIO, TX 78229

Title: PD (X) Change ( ) Addition  
Name: CARTER, GREG M  
Address: 7411 JOHN SMITH DRIVE, SUITE 1500  
City-St-Zip: SAN ANTONIO, TX 78229

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: JAMES W. BLUM

VP

04/03/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date