

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F00000003071

FILED
Apr 25, 2006
Secretary of State

Entity Name: BEACON RESPIRATORY SERVICES, INC.

Current Principal Place of Business:

13850 TREELINE AVENUE SOUTH
UNIT 1
FORT MYERS, FL 33913

New Principal Place of Business:

Current Mailing Address:

550 N. BUMBY AVE.
SUITE 215
ORLANDO, FL 32803 US

New Mailing Address:

FEI Number: 59-3641476 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

IRISH, REBECCA
1614 LAKESIDE DRIVE
ORLANDO, FL 328031508 US

Name and Address of New Registered Agent:

IRISH, REBECCA R
550 N. BUMBY AVENUE, SUITE 215
ORLANDO, FL 328031508 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: REBECCA R. IRISH

04/25/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PDTS () Delete
Name: IRISH, REBECCA R
Address: 1614 LAKESIDE DRIVE
City-St-Zip: ORLANDO, FL 328031508 US

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: KUHNERT, LAWRENCE R
Address: 405 5TH AVENUE SOUTH, SUITE 6
City-St-Zip: NAPLES, FL 34102 US

Title: SCFO () Change (X) Addition
Name: IRISH, REBECCA R
Address: 550 N. BUMBY AVENUE, SUITE 215
City-St-Zip: ORLANDO, FL 32803

Title: CCEO () Change (X) Addition
Name: ELLIOTT, JOHN E II
Address: 405 5TH AVENUE SOUTH, SUITE 6
City-St-Zip: NAPLES, FL 34102

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: REBECCA R. IRISH

SCFO

04/25/2006

Electronic Signature of Signing Officer or Director

Date