

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000047530

Entity Name: MEDED AMERICA, INC.

FILED
Jan 27, 2005
Secretary of State

Current Principal Place of Business:

3 SOUTH G STREET
PENSACOLA, FL 32501

New Principal Place of Business:

7482 CHASE STREET
NAVARRE, FL 32566

Current Mailing Address:

3 SOUTH G STREET
PENSACOLA, FL 32501

New Mailing Address:

7482 CHASE STREET
NAVARRE, FL 32566

FEI Number: 04-3659409

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RANSDELL, KARIN
3 SOUTH G STREET
PENSACOLA, FL 32501 US

Name and Address of New Registered Agent:

CARPER, DORTHEA P
7482 CHASE STREET
NAVARRE, FL 32566 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: DORTHEA P. CARPER

01/27/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: CARPER, DORTHEA P
Address: 5210 PHOENIX DRIVE
City-St-Zip: MILTON, FL 32583

Title: D (X) Delete
Name: RANSDELL, KARIN
Address: 10 VICTORIA PLACE
City-St-Zip: PENSACOLA, FL 32507

Title: D (X) Delete
Name: RANSDELL, MAURICE G
Address: 10 VICTORIA PLACE
City-St-Zip: PENSACOLA, FL 32507

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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 Section 119.07(3)(i), 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: DORTHEA P CARPER

D

01/27/2005

Electronic Signature of Signing Officer or Director

Date