

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000063918

FILED
Feb 21, 2009
Secretary of State

Entity Name: DOCTOR EASY MEDICAL PRODUCTS CORPORATION

Current Principal Place of Business:

784 BLANDING BLVD
SUITE 109
ORANGE PARK, FL 32065 US

New Principal Place of Business:

Current Mailing Address:

P. O. BOX 1717
ORANGE PARK, FL 32067 US

New Mailing Address:

FEI Number: 59-3206112 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ELLIOTT, ORVILLE G
4421 SADDLEHORN TL
MIDDLEBURG, FL 32068 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: GARCIA, TEDDY J
Address: 3146 NAUTILUS RD
City-St-Zip: MIDDLEBURG, FL 32068

Title: D () Delete
Name: GARCIA, MARSHA E
Address: 2880 SWEETHOLLY DR
City-St-Zip: JACKSONVILLE, FL 32223

Title: D () Delete
Name: ELLIOTT, ORVILLE G
Address: 4421 SADDLEHORN TRAIL
City-St-Zip: MIDDLEBURG, FL 32068

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: ROTHSTEIN, SIMON
Address: 4417 BEACH BLVD, SUITE 104
City-St-Zip: JACKSONVILLE, FL 32207

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 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: MARSHA E. GARCIA

SEC

02/21/2009

Electronic Signature of Signing Officer or Director

Date