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CITY-ST-ZIP

STREET ADDRESS

TITLE

NAME

**FILED** FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 Apr 20 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State **ANNUAL REPORT** Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # 561216 (3)BIRDSONG MEDICAL SALES, INC. Mailing Address Principal Place of Business 3400 EMERYWOOD LANE 3400 EMERYWOOD LANE ORLANDO FL 32612 ORLANDO FL 32812 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified <u>03/01/1978</u> 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For Not Applicable 21 26 <del>59-1814524</del> Suite, Apt. #, etc. Suite, Apt #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be 28 Trust Fund Contribution Added to Fees 23 Zio Country Žφ Country 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. Yes ☐ No 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name BIRDSONG. ROBERT G. 3400 EMERYWOOD LANE 82 Street Address (P.O. Box Number is Not Acceptable) ORLANDO FL 32812 83 Zip Code 84 City 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE Change Addition TITLE 11 TITLE BIRDSONG, ROBERT G. NAME 1.2 NAME 3400 EMERYWOOD LANE STREET ADDRESS 1.3 STREET ADDRESS **O**RLANDO FL CITY-ST-ZIP 1.4 C(TY - ST - Z(P Change DELETE Addition TITLE 2 1 TITLE **BIRDSONG, ANNETTE S.** 2.2 NAME NAME **8400 EMERYWOOD LANE** STREET ADDRESS 2.3 STREET ADDRESS Orlando fl CITY-ST-ZIP 2.4 CITY-ST-ZIP ☐ DELETE Change Addition 31 THLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 44 CITY-ST-ZIP Change DELETE Addition TITLE 5.1 TOLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS

(10/97)

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Addition

6.4 CITY-ST-ZIP 14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this arrual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address

5.4 CITY - ST - ZIP

6.3 STREET ADDRESS

6.1 TITLE

6.2 NAME

DELETE