FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

1. Corporation Name

572136

(0)

WILLIAMS! RESPIRATORY SERVICES, INC.

FILED Mar 27 1998 8:00am Secretary of State

WILLIAMS RESPIRATORY SERVICES, INC.						
Principal Place of Business Maiting Address						I (UDIT) BAHI NOOM HOS! (UDDE SAHD BAH DIDI) DIDI) QIDIA BIDIA BIDIA BIDIA TEDIK (ETA)
4301 32 ST. W.		4301 32 ST. W.				
SUITE C-6 BRADENTON FL \$4205		SUITE C-6 BRADENTON FL 34205			DO NOT WRITE IN THIS SPACE	
US		US				3. Date Incorporated or Qualified
					05/16/1978	
2. Principal P	2a. Mailing Address	Mailing Address			4. FEI Number Applied For	
21	# -T-	26				59-1821412 Not Applicable
Sulte, Apt.	#, etc.	Suite, Apt. #, etc.	-			5. Certificate of Status Desired Service Servi
22 City & Stat	Δ	City & State	City & State			· · · · · · · · · · · · · · · · · · ·
23		28				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution
Zip			Co	untry	· · · · · · · · · · · · · · · · · · ·	8. This corporation owes or has paid the current year Intangible
24	25 29 30				Personal Property Tax due June 30.	
	9. Name and Address of Curren	t Registered Agent		\prod		10. Name and Address of New Registered Agent
WILLIAMS, RONALD L					Name	
4301 32ND STREET WEST			82	Street Addre	Address (P.O. Box Number is Not Acceptable)	
SUITE C-6						
BR/	ADENTON FL 34205			83		
				84	City	■■ 85 Zip Code
	-			╙		FL S Zip Code
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 register 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 register						
agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.						
SIGNATURE Signature, typed or prioted name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE						
12.	OFFICERS AND		13.	· · · · · · · ·	ni aignatore reduse	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PD	☐ DELETE		ITLE		Change Addition
NAME WILLIAMS, RONALD L			1.2 NAME			
STREET ADDRESS 5011 21ST AVE W			1.3 STREET ADDRESS		ADDRESS	
CITY-ST-ZIP	BRADENTON FL 140		CITY-S	T-ZIP		
TITLE	D	DELETE	211	ITLE		☐ Change ☐ Addition
NAME	WILLIAMS, TODD J		2.2 NAM			
STREET ADDRESS	4411 4441 1114 11441		STAEET	address		
CITY-ST-ZIP			CITY-S	IT - ZIP		
TITLE	D	DELETE 3.1		ITLE		Change Addition
NAME	11 444 101 101 11200011		AME	.		
STREET ADDRESS					AÓDRESS	
CITY-ST-ZIP	Dr. Care		CITY-S	T-ZIP	Change Addition	
TITLE	DEADMAG DOGED	רוֹ הנינונ	4.1 7			L Change L Addition
NAME Street Address	DEARMAS, ROGER 10378 NW 46TH TERRACE			NAME	ADDRESS	
	MIAMI FL 33178			HTY-SI	- 1	
CITY-ST-ZIP TITLE	IIIIAMI I F 20110	DELETE	5.1 T		1-21	Change Addition
NAME		<u> </u>		IAME		
STREET ADDRESS					ADDRESS	
CITY-ST-ZIP				ITY-S1		
TITLE	 	☐ DELETE	6.1 T			☐ Change ☐ Addition
NAME			6.2 N	IAME		
STREET ADORESS			6.3 S	TREET	ADDRESS	
CITY-ST-ZIP				ITY-SI		
14. I hereby c	certify that the information supplied wi	th this filing does not qualify	for the ex	eropi	ion stated in S	Section 119.07(3)(i), Florida Statutes. I further certify that the information

4. 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 informatic indicated on this annual report or supplemental annual struct 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 of the structure of the corporation or the receiver of the structure of the corporation or the receiver of the structure of the

CICNIATURE

3-12-91 305267180