2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 21, 2009
Secretary of State

DOCUMENT# F00000002239

Entity Name: AMERICAN MEDICAL ALARMS, INC.

Current Principal Place of Business:

4414 SE 16TH PLACE
SUITE# 4
CAPE CORAL, FL 33904

New Principal Place of Business:

Current Mailing Address:

4414 SE 16TH PLACE
SUITE#4
CAPE CORAL, FL 33904

New Mailing Address:

4414 SE 16TH PLACE
SUITE# 4
CAPE CORAL, FL 33904

FEI Number: 36-4258022 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: PCD ( ) Delete
Name: SCHALL, KIRBY J JR.
Address: 1401 SW 57TH ST
City-St-Zip: CAPE CORAL, FL 33914

Title: STD ( ) Delete
Name: SCHALL, GRETA M
Address: 1401 SW 57TH ST
City-St-Zip: CAPE CORAL, FL 33914

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: KIRBY J SCHALL JR PRES 03/21/2009

Electronic Signature of Signing Officer or Director — Date