

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000000070

Entity Name: MMSI, INC.

FILED
Apr 18, 2008
Secretary of State

Current Principal Place of Business:

200 FIRST STREET SW
LEGAL DEPARTMENT
ROCHESTER, MN 55905

New Principal Place of Business:

Current Mailing Address:

200 FIRST STREET SW
LEGAL DEPARTMENT
ROCHESTER, MN 55905

New Mailing Address:

FEI Number: 41-1547003 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NELSON, STEPHEN P ESQ.
4500 SAN PABLO ROAD
JACKSONVILLE, FL 32224 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: V () Delete
Name: GORMAN, R S MD
Address: 13400 EAST SHEA BLVD
City-St-Zip: SCOTTSDALE, AZ 85259

Title: T () Delete
Name: MATTHIAS, MARK
Address: 200 FIRST STREET SW
City-St-Zip: ROCHESTER, MN 55905

Title: S () Delete
Name: ROTT, BRIAN W
Address: 200 FIRST STREET SW
City-St-Zip: ROCHESTER, MN 55905

Title: P () Delete
Name: SCHWENK, NINA M
Address: 200 FIRST STREET SW
City-St-Zip: ROCHESTER, MN 55905

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

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:

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

Title: D () Change (X) Addition
Name: EDWARDS, BROOKS S M.D.
Address: 200 FIRST STREET SW
City-St-Zip: ROCHESTER, MN 55905

Title: D () Change (X) Addition
Name: PRESUTTI, RICHARD DO
Address: 4500 SAN PABLO
City-St-Zip: JACKSONVILLE, FL 32224

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: BRIAN W. ROTT

SECR

04/18/2008

Electronic Signature of Signing Officer or Director

_____ Date