

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Feb 17, 2006 8:00 am**  
**Secretary of State**

02-17-2006 90074 033 \*\*\*158.75

**DOCUMENT # F05000003230**

1. Entity Name

OXTHERA, INC.



Principal Place of Business

13709 PROGRESS BLVD.,  
BOX 13  
ALACHUA FL 32615

Mailing Address

13709 PROGRESS BLVD.,  
BOX 13  
ALACHUA FL 32615

2. Principal Place of Business

13709 Progress Blvd  
Suite, Apt. #, etc.  
Box 17

3. Mailing Address

13709 Progress Blvd  
Suite, Apt. #, etc.  
Box 17

City & State

Alachua, FL

City & State

Alachua, FL

Zip

32615

Country

USA

Zip

32615

Country

USA

4. FEI Number

37-1510607

Applied For

Not Applicable

5. Certificate of Status Desired

☒ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE FL 32301-2525

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00**

**After May 1, 2006 Fee Will Be \$550.00**

**Make Check Payable to Florida Department of State**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be  
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE C ☒ Delete  
NAME AGERUP, BENGT  
STREET ADDRESS 13709 PROGRESS BLVD.,  
CITY-ST-ZIP ALACHUA FL 32615

TITLE D ☒ Delete  
NAME BOLIN, CARINA  
STREET ADDRESS 13709 PROGRESS BLVD.,  
CITY-ST-ZIP ALACHUA FL 32615

TITLE D ☒ Delete  
NAME PECK, DAVID  
STREET ADDRESS 13709 PROGRESS BLVD.,  
CITY-ST-ZIP ALACHUA FL 32615

TITLE P ☒ Delete  
NAME SIDHU, HARMEET  
STREET ADDRESS 13709 PROGRESS BLVD.,  
CITY-ST-ZIP ALACHUA FL 32615

TITLE VPS ☒ Delete  
NAME FOSMOE, ALBERT G II  
STREET ADDRESS 13709 PROGRESS BLVD.,  
CITY-ST-ZIP ALACHUA FL 32615

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PRESIDENT ☐ Change ☒ Addition  
NAME JON HEIMER  
STREET ADDRESS 13709 PROGRESS BLVD, Bx 17  
CITY-ST-ZIP ALACHUA, FL 32615

TITLE COO ☒ Change ☐ Addition  
NAME Albert G Fosmoe II  
STREET ADDRESS 13709 PROGRESS BLVD., Box 17  
CITY-ST-ZIP ALACHUA, FL 32615

TITLE CSO ☒ Change ☐ Addition  
NAME Dr. Harmeet Sidhu  
STREET ADDRESS 13709 PROGRESS BLVD., Box 17  
CITY-ST-ZIP ALACHUA, FL 32615

TITLE TREASURER & SECRETARY ☐ Change ☒ Addition  
NAME TRACY M. DESON  
STREET ADDRESS 13709 PROGRESS BLVD., Box 17  
CITY-ST-ZIP ALACHUA, FL 32615

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/2/06 386-418-1428

Date

Daytime Phone #