2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000005344

Entity Name: AOI MEDICAL, INC

FILED Apr 30, 2008 Secretary of State

Current Princip	pal Place of Business:	New Principal Place of Business

3251 PROGRESS DRIVE, SUITE B2 2100 N. ALAFAYA TR ORLANDO, FL 32826 SUITE 100

ORLANDO, FL 32826

Current Mailing Address: New Mailing Address:

3251 PROGRESS DRIVE, SUITE B2
ORLANDO, FL 32826
2100 N. ALAFAYA TR
SUITE 100
ORLANDO, FL 32826
ORLANDO, FL 32826

FEI Number: 20-2402994 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

CHRISTY, WILLIAM J
CHRISTY, WILLIAM J
CHRISTY, WILLIAM J

3251 PROGRESS DRIVE, SUITE B2 2100 N. ALAFAYA TR, SUITE 100 ORLANDO, FL 32826 US ORLANDO, FL 32826 US

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: 04/30/2008

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: C () Delete Title: C (X) Change () Addition

 Name:
 FELTMAN, JOHN D
 Name:
 FELTMAN, JOHN D

 Address:
 11 PACES WEST DR NW
 Address:
 2100 N. ALAFAYA TR, SUITE 100

City-St-Zip: ATLANTA, GA 30327 City-St-Zip: ORLANDO, FL 32826

Title: T () Delete Title: T (X) Change () Addition Name: JOHNSTON, ANGELA Name: JOHNSTON, ANGELA

Name: JOHNSTON, ANGELA Name: JOHNSTON, ANGELA
Address: 13505 PHOENIX DR. Address: 2100 N. ALAFAYA TR, SUITE 100

City-St-Zip: ORLANDO, FL 32828 City-St-Zip: ORLANDO, FL 32826

Title: P () Delete Title: P (X) Change () Addition Name: CHRISTY, WILLIAM J Name: CHRISTY, WILLIAM J

 Address:
 1235 VIA ESTRELLA
 Address:
 2100 N. ALAFAYA TR, SUITE 100

 City-St-Zip:
 WINTER PARK, FL 32789
 City-St-Zip:
 ORLANDO, FL 32826

Title: VP () Delete Title: VP (X) Change () Addition Name: GOLDIN, MARK Name: GOLDIN, MARK Address: 2427 TREYMORE DRIVE Address: 2100 N. ALAFAYA TR, SUITE 100

City-St-Zip: ORLANDO, FL 32825 City-St-Zip: ORLANDO, FL 32826

Title: S () Delete Title: S (X) Change () Addition Name: WHEELER, D. KEEHLN Name: WHEELER, D. KEEHLN

Address: 3143 EAST SHADOW LAWN AVENUE Address: 2100 N. ALAFAYA TR. SUITE 100

City-St-Zip: ATLANTA, GA 30305 City-St-Zip: ORLANDO, FL 32826

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: ANGELA JOHNSTON T 04/30/2008