

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000005696

FILED  
Apr 21, 2009  
Secretary of State

Entity Name: HEALTH RESOURCES, LTD. INCORPORATED

## Current Principal Place of Business:

2614 ABBEY GROVE DRIVE  
VALRICO, FL 33594 46

## New Principal Place of Business:

2614 ABBEY GROVE DRIVE  
VALRICO, FL 33594

## Current Mailing Address:

2614 ABBEY GROVE DRIVE  
VALRICO, FL 33594 46

## New Mailing Address:

2614 ABBEY GROVE DRIVE  
VALRICO, FL 33594

FEI Number: 43-1071404

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SUTTMILLER, JENNIFER L  
457 SAND RIDGE DR  
VALRICO, FL 33594 US

## Name and Address of New Registered Agent:

HAMMERLE, RONALD L  
2614 ABBEY GROVE DRIVE  
VALRICO, FL 33594 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: RONALD L. HAMMERLE

04/21/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: CPT ( ) Delete  
Name: HAMMERLE, RONALD L  
Address: 2614 ABBEY GROVE DRIVE  
City-St-Zip: TAMPA, FL 33594

Title: VP ( ) Delete  
Name: SUTTMILLER, JENNIFER L  
Address: 457 SAND RIDGE DR  
City-St-Zip: VALRICO, FL 335944058

Title: S ( ) Delete  
Name: HAMMERLE, BARBARA L  
Address: 2614 ABBEY GROVE DRIVE  
City-St-Zip: VALRICO, FL 33594

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP (X) Change ( ) Addition  
Name: SANDERS, JAY H M.D.  
Address: 7850 WESTMONT LANE  
City-St-Zip: MCLEAN, VA 22102

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: RONALD L. HAMMERLE

CPT

04/21/2009

Electronic Signature of Signing Officer or Director

Date