

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000006098

FILED
Mar 20, 2009
Secretary of State

Entity Name: SURGICAL OUTCOME SUPPORT, INC.

Current Principal Place of Business:

7108 FAIRWAY DRIVE
SUITE 205
PALM BEACH GARDENS, FL 33418

New Principal Place of Business:

600 HERITAGE DRIVE
SUITE 110
JUPITER, FL 33458

Current Mailing Address:

7108 FAIRWAY DRIVE
SUITE 205
PALM BEACH GARDENS, FL 33418

New Mailing Address:

600 HERITAGE DRIVE
SUITE 110
JUPITER, FL 33458

FEI Number: 20-5358832

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

REED, MICHAEL
600 HERITAGE DRIVE
SUITE 110
JUPITER, FL 33458 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: PCEO () Delete
Name: REED, MICHAEL
Address: 7108 FAIRWAY DRIVE, STE 205
City-St-Zip: PALM BEACH GARDENS, FL 33418

Title: D () Delete
Name: FREDERICKSON, TUCKER
Address: 7108 FAIRWAY DRIVE, STE 205
City-St-Zip: PALM BEACH GARDENS, FL 33418

Title: V () Delete
Name: KOLB, CHRISTOPHER L
Address: 7108 FAIRWAY DRIVE, STE 205
City-St-Zip: PALM BEACH GARDENS, FL 33418

Title: V (X) Delete
Name: ENGLAND, GEORGE W JR.
Address: 7108 FAIRWAY DRIVE, STE 205
City-St-Zip: PALM BEACH GARDENS, FL 33418

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PCEO (X) Change () Addition
Name: REED, MICHAEL
Address: 600 HERITAGE DR, STE 110
City-St-Zip: JUPITER, FL 33458

Title: D (X) Change () Addition
Name: FREDERICKSON, TUCKER
Address: 600 HERITAGE DR, STE 110
City-St-Zip: JUPITER, FL 33458

Title: D (X) Change () Addition
Name: SHUTER, DAVID
Address: 600 HERITAGE DR, STE 110
City-St-Zip: JUPITER, FL 33458

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: MICHAEL L. REED

CEO

03/20/2009

Electronic Signature of Signing Officer or Director

_____ Date