2011 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 29, 2011
Secretary of State

DOCUMENT# G40092

Entity Name: SUNRISE MEDICAL SERVICES, INC.

Current Principal Place of Business:

6698 WASHINGTON ROAD
APPLING, GA 30802 US

New Principal Place of Business:

Current Mailing Address:

3729 FOXFIRE PLACE
AUGUSTA, GA 30907 US

New Mailing Address:

3776 WEST LAKE DRIVE
AUGUSTA, GA 30907 US

FEI Number: 58-1789544 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

COKER, RICHARD G., JR.
1401 S. ANDREWS AVENUE
FT. LAUDERDALE, FL 333161840 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

OFFICERS AND DIRECTORS:

Title: P
Name: MCKETTRICK, WILLIAM T.
Address: 3776 WEST LAKE DRIVE
City-St-Zip: AUGUSTA, GA 30907

Title: S
Name: MCKETTRICK, CYNTHIA B.
Address: 3776 WEST LAKE DRIVE
City-St-Zip: AUGUSTA, GA 30907

I hereby 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 all other like empowered.

SIGNATURE: WILLIAM T MCKETTRICK PRES 03/29/2011

Electronic Signature of Signing Officer or Director Date