

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J18243

FILED
Apr 29, 2009
Secretary of State

Entity Name: CENTURY MEDICAL CORPORATION

Current Principal Place of Business:

2611 WEST VINE STREET
KISSIMMEE, FL 347413972

New Principal Place of Business:

Current Mailing Address:

2611 WEST VINE STREET
KISSIMMEE, FL 347413972

New Mailing Address:

FEI Number: 59-2688447

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ALLEN, AIE YOUNG
2611 WEST VINE STREET
KISSIMMEE, FL 32741 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: D () Delete
Name: ALLEN, AIE YOUNG
Address: 2611 WEST VINE STREET
City-St-Zip: KISSIMMEE, FL

Title: PST () Delete
Name: ALLEN, AIE YOUNG
Address: 2611 WEST VINE STREET
City-St-Zip: KISSIMMEE, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: AIE YOUNG ALLEN

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04/29/2009

Electronic Signature of Signing Officer or Director

Date