## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J96922

MIDDLEBURG, FL 32068

City-St-Zip:

Entity Name: FLORIDA MEDICAL SALES INC.

FILED Apr 14, 2009 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:		
1543 KING BUILDING	SSLEY AVE				
	PARK, FL 3207	3 US			
Current Mailing Address:			New Mailing Address	New Mailing Address:	
1543 KING BUILDING	SLEY AVENUE				
	PARK, FL 3207	3 US			
FEI Number:	: 59-2858394	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:					
SUITE 105	DENTIAL DRIVE				
	named entity sue of Florida.	ubmits this statement for th	e purpose of changing its registered	I office or registered agent, or both,	
SIGNATU	RE:				
	Electronic	Signature of Registered A	\gent	Date	
Election Car	npaign Financing	Trust Fund Contribution ( ).			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P () [ WINTON, HERSO 3122 NAUTILUS MIDDLEBURG, F	ROAD	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address:	VST ()[ WINTON, DENIS 3122 NAUTILUS		Title: Name: Address:	( ) Change ( ) Addition	

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: DENISE WINTON VST 04/14/2009