

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000005875

FILED  
Apr 12, 2008  
Secretary of State

Entity Name: MEDICAL HELP INTERNATIONAL, INC.

## Current Principal Place of Business:

1917 TYNDALL DRIVE  
PANAMA CITY, FL 32401

## New Principal Place of Business:

6422 BUFORD KING LANE  
YOUNGSTOWN, FL 32466

## Current Mailing Address:

4475 CADIZ ROAD  
HOPKINSVILLE, KY 42240

## New Mailing Address:

901 OAKGROVE ROAD  
DAHLONEGA, GA 30533

FEI Number: 59-3734922

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ETHERIDGE, SHARRON  
1917 TYNDALL DRIVE  
PANAMA CITY, FL 32401 US

## Name and Address of New Registered Agent:

ETHERIDGE, SHARRON  
6422 BUFORD KING LANE  
YOUNGSTOWN, FL 32466 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:

04/12/2008

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: DIR ( ) Delete  
Name: BRYAN, MILDRED  
Address: 4475 CADIZ ROAD  
City-St-Zip: HOPKINSVILLE, KY 42240

Title: S ( ) Delete  
Name: HARRIS, PATRICIA  
Address: 314 DEERWOOD DRIVE  
City-St-Zip: HOPKINSVILLE, KY 42240

Title: T ( ) Delete  
Name: BOZYSKI, JACKIE  
Address: 246 RED CORAL LANE  
City-St-Zip: CADIZ, KY 42211

Title: V ( ) Delete  
Name: TAYLOR, CRISTA  
Address: 502B CUTTY TRAIL  
City-St-Zip: AUSTIN, TX 78734

Title: D ( ) Delete  
Name: ANGELIA, TRANSUE  
Address: 901 OAKGROVE ROAD  
City-St-Zip: DAHLONEGA, GA 30533

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: BRYAN, MILDRED  
Address: 4475 CADIZ ROAD  
City-St-Zip: HOPKINSVILLE, KY 42240

Title: D (X) Change ( ) Addition  
Name: HOAR, BEN  
Address: 4960 BENTRIDGE DRIVE  
City-St-Zip: CONCORD, NC 28027

Title: D (X) Change ( ) Addition  
Name: BOZYSKI, JACKIE  
Address: 246 RED CORAL LANE  
City-St-Zip: CADIZ, KY 42211

Title: D (X) Change ( ) Addition  
Name: TAYLOR, CRISTA  
Address: 235-A MOORING CIRCLE  
City-St-Zip: AUSTIN, TX 78734

Title: P (X) Change ( ) Addition  
Name: ANGELIA, TRANSUE  
Address: 901 OAKGROVE ROAD  
City-St-Zip: DAHLONEGA, GA 30533

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ANGELIA TRANSUE

P

04/12/2008

Electronic Signature of Signing Officer or Director

Date