

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000005875

FILED
May 02, 2010
Secretary of State

Entity Name: MEDICAL HELP INTERNATIONAL, INC.

Current Principal Place of Business:

6422 BUFORD KING LANE
YOUNGSTOWN, FL 32466

New Principal Place of Business:

Current Mailing Address:

901 OAKGROVE ROAD
DAHLONEGA, GA 30533

New Mailing Address:

FEI Number: 59-3734922 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D
Name: BRYAN, MILDRED
Address: 4475 CADIZ ROAD
City-St-Zip: HOPKINSVILLE, KY 42240

Title: D
Name: HOAR, BEN
Address: 4960 BENTRIDGE DRIVE
City-St-Zip: CONCORD, NC 28027

Title: D
Name: HOAR, SUSAN
Address: 4960 BENTRIDGE DRIVE
City-St-Zip: CONCORD, NC 28027

Title: D
Name: TAYLOR, CRISTA
Address: 235-A MOORING CIRCLE
City-St-Zip: AUSTIN, TX 78734

Title: P
Name: ANGELIA, TRANSUE
Address: 901 OAKGROVE ROAD
City-St-Zip: DAHLONEGA, GA 30533

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

SIGNATURE: MILDRED BRYAN

D

05/02/2010

Electronic Signature of Signing Officer or Director

Date