2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 04, 2007
Secretary of State

DOCUMENT# P01000085303

Entity Name: CRYSTAL HOME MEDICAL EQUIPMENT, INC.

Current Principal Place of Business:

2041 NORTH DONOVAN AVENUE
CRYSTAL RIVER, FL 34428

New Principal Place of Business:

Current Mailing Address:

PO BOX 1016
CRYSTAL RIVER, FL 34423

New Mailing Address:

FEI Number: 59-3741167 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

DEAN, MICHAEL
230 NE 25 AVE
OCALA, FL 34478 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: PDV ( ) Delete
Name: ALLEN, CHARLES B
Address: 950 N LYLE AVE
City-St-Zip: CRYSTAL RIVER, FL 34428

Title: D ( ) Delete
Name: PALMER, ANNA M
Address: 4601 W CASPER LANE
City-St-Zip: BEVERLY HILLS, FL 34465

Title: ST ( ) Delete
Name: ALLEN, ROBIN
Address: 950 N LYLE AVE
City-St-Zip: CRYSTAL RIVER, FL 34428

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PDV (X) Change ( ) Addition
Name: PALMER, ANNA M
Address: PO BOX 2216
City-St-Zip: CRYSTAL RIVER, FL 34423

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

Title: ST (X) Change ( ) Addition
Name: PALMER, ANNA M
Address: PO BOX 2216
City-St-Zip: CRYSTAL RIVER, FL 34423

I hereby certify that the information supplied with this filing does not qualify for the 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: A. MARVEEN PALMER D 01/04/2007

Electronic Signature of Signing Officer or Director Date