

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000121561

Entity Name: APS RESPIRATORY, INC.

FILED  
Mar 16, 2006  
Secretary of State

## Current Principal Place of Business:

2221 SOUTH PINE AVENUE  
OCALA, FL 34471 US

## New Principal Place of Business:

2221 SOUTH PINE AVENUE  
SUITE A  
OCALA, FL 34471 US

## Current Mailing Address:

2221 SOUTH PINE AVENUE  
OCALA, FL 34471 US

## New Mailing Address:

2221 SOUTH PINE AVENUE  
SUITE A  
OCALA, FL 34471 US

FEI Number: 03-0449452

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ORTIZ, GEORGE  
1515 EAST SILVER SPRINGS BLVD.  
SUITE 128  
OCALA, FL 34470 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: PDTS ( ) Delete  
Name: BEEBE, GEORGE S  
Address: 6925 S.W. 18TH TERRACE RD.  
City-St-Zip: OCALA, FL 34476 US

Title: VD (X) Delete  
Name: BEEBE, JANE S  
Address: 6925 S.W. 18TH TERRACE RD.  
City-St-Zip: OCALA, FL 34476 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PVPD (X) Change ( ) Addition  
Name: BEEBE, GEORGE S  
Address: 6925 S.W. 18TH TERRACE RD.  
City-St-Zip: OCALA, FL 34476 US

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

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: GEORGE S. BEEBE

PVPD

03/16/2006

Electronic Signature of Signing Officer or Director

Date