

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000040364

FILED
Apr 21, 2008
Secretary of State

Entity Name: SUN OSTEOPATHIC MEDICAL CENTER, INC.

Current Principal Place of Business:

1524 E LIVINGSTON ST
ORLANDO, FL 32803

New Principal Place of Business:

Current Mailing Address:

1524 E LIVINGSTON ST
ORLANDO, FL 32803

New Mailing Address:

FEI Number: 03-0442429

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ENGLEHARDT, JOHN C
1524 E LIVINGSTON ST
ORLANDO, FL 32803 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: PS () Delete
Name: SHEWMAKER, JOHN DO
Address: 5806 LAKE UNDERHILL RD
City-St-Zip: ORLANDO, FL 32807

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PS (X) Change () Addition
Name: SHEWMAKER, JOHN DO
Address: 4985 HOFFNER
City-St-Zip: ORLANDO, FL 32812

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: JOHN SHEWMAKER

CEO

04/21/2008

Electronic Signature of Signing Officer or Director

_____ Date