

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000048918

Entity Name: WOUND THERAPY, INC.

FILED
Sep 05, 2012
Secretary of State

Current Principal Place of Business:

6850 POSSUM TRAIL
SARASOTA, FL 34240

New Principal Place of Business:

Current Mailing Address:

6850 POSSUM TRAIL
SARASOTA, FL 34240

New Mailing Address:

FEI Number: 04-3661052

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SALLITTO, CATHLEEN
6850 POSSUM TRAIL
SARASOTA, FL 34240 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

OFFICERS AND DIRECTORS:

Title: PSTD
Name: SALLITTO, CATHLEEN
Address: 6850 POSSUM TRAIL
City-St-Zip: SARASOTA, FL 34240

Title: VSD
Name: SALLITTO, JOSEPH
Address: 6850 POSSUM TRAIL
City-St-Zip: SARASOTA, FL 34240

Title: VD
Name: SALLITTO, SEAN
Address: 6850 POSSUM TRAIL
City-St-Zip: SARASOTA, FL 34241 US

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

SIGNATURE: CATHLEEN SALLITTO

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09/05/2012

Electronic Signature of Signing Officer or Director

Date