2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2006
Secretary of State

DOCUMENT# P02000074612

Entity Name: VOLUSIA MEDICAL SUPPLY, INC.

Current Principal Place of Business:

369 BILL FRANCE BLVD
DAYTONA BEACH, FL 32114

New Principal Place of Business:

591 BEVILLE RD.
SOUTH DAYTONA, FL 32119

Current Mailing Address:

369 BILL FRANCE BLVD
DAYTONA BEACH, FL 32114

New Mailing Address:

591 BEVILLE RD.
SOUTH DAYTONA, FL 32119

FEI Number: 16-1624137 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

AZIZ, LAIKHUNNISA
275 GALA CIR
DAYTONA BEACH, FL 32124 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: P ( ) Delete
Name: AZIZ, LAIKHUNNIS A
Address: 275 GALA CIRCLE
City-St-Zip: DAYTONA BEACH, FL 32124

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: AZIZ, LAIKHUNNISA
Address: 275 GALA CIRCLE
City-St-Zip: DAYTONA BEACH, FL 32124

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: LAIKHA AZIZ OWNE 04/27/2006
Electronic Signature of Signing Officer or Director Date