

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000062330

Entity Name: PROVIDIAN RESPIRATORY, INC.

FILED  
Jan 17, 2005  
Secretary of State

**Current Principal Place of Business:**

2221 S PINE AVENUE  
SUITE A  
OCALA, FL 34471

**New Principal Place of Business:**

**Current Mailing Address:**

2221 S PINE AVENUE  
SUITE A  
OCALA, FL 34471

**New Mailing Address:**

FEI Number: 20-1000899      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

KING, WILLIAM ALLAN  
1531 SE 36TH AVENUE  
OCALA, FL 34471 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: DP ( ) Delete  
Name: WILLIAM, RANDY  
Address: 2900 SE 35TH STREET  
City-St-Zip: OCALA, FL 34471

Title: DS ( ) Delete  
Name: MARR, DAVID  
Address: 1710 SE 43RD TERRACE  
City-St-Zip: OCALA, FL 34471

Title: DT ( ) Delete  
Name: MARR, JEFFREY D  
Address: 1710 SE 43RD TERRACE  
City-St-Zip: OCALA, FL 34471

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: RANDY WILLIAMS

P

01/17/2005

Electronic Signature of Signing Officer or Director

Date