

# 2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P04000163413

Entity Name: DIDRICK MEDICAL INC.

FILED  
Sep 09, 2009  
Secretary of State

## Current Principal Place of Business:

390 COUNTRY CLUB LANE  
NAPLES, FL 34110 US

## New Principal Place of Business:

## Current Mailing Address:

390 COUNTRY CLUB LANE  
NAPLES, FL 34110 US

## New Mailing Address:

FEI Number: 20-1965654

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

FORM-A-CORP LLC  
100 VILLAGE SQUARE CROSSING  
SUITE 103  
PALM BEACH GARDENS, FL 33410 US

## Name and Address of New Registered Agent:

SAM, SAAD J III  
1575 PINE RIDGE ROAD  
SUITE 16  
NAPLES, FL 34109 US

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: SAM J. SAAD III, PA

09/09/2009

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: CEO ( ) Delete  
Name: DIDRICK, DANIEL  
Address: 390 COUNTRY CLUB DRIVE  
City-St-Zip: NAPLES, FL 34110 US

Title: PRES ( ) Delete  
Name: ZAJACZKOWSKI, SCOTT D  
Address: 390 COUNTRY CLUB DRIVE  
City-St-Zip: NAPLES, FL 34110

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CEO (X) Change ( ) Addition  
Name: DIDRICK, DANIEL  
Address: 390 COUNTRY CLUB LANE  
City-St-Zip: NAPLES, FL 34110 US

Title: PRES (X) Change ( ) Addition  
Name: ZAJACZKOWSKI, SCOTT D  
Address: 390 COUNTRY CLUB LANE  
City-St-Zip: NAPLES, FL 34110

Title: COO ( ) Change (X) Addition  
Name: SIMMONS, MATTHEW A  
Address: 390 COUNTRY CLUB LANE  
City-St-Zip: NAPLES, FL 34110

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: SCOTT D. ZAJACZKOWSKI

PRES

09/09/2009

Electronic Signature of Signing Officer or Director

Date