2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000095547

Entity Name: MEDICAL TECHNOLOGY ASSOCIATES OF TEXAS, INC.

FILED Apr 17, 2009 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:			
12445 - 62N SUITE 305 LARGO, FL	ND ST., NORTH . 33773	1					
Current Mailing Address:				New Mailing Address:			
12445 - 62N SUITE 305 LARGO, FL	ND ST., NORTH . 33773	+					
FEI Number:	86-1143044	FEI Number Applied For ()	FEI Nun	nber Not Appli	cable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:			
PETITO, FRED C 12445 - 62ND ST., NORTH SUITE 305 LARGO, FL FL US				PETRUNICK, SCOTT B 12445 - 62ND ST., NORTH SUITE 305 LARGO, FL FL 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: S. BLAKE PETRUNICK				04/17/2009			
	Electronic	Signature of Registered Agent	t			Date	
Election Cam	paign Financing	Trust Fund Contribution ().					
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:				
Title: Name: Address: City-St-Zip:	PETITO, FRED C	., NORTH, STE 305		Title: Name: Address: City-St-Zip:	()	Change () Addition	
Title: Name: Address: City-St-Zip:	D ()E BECKER, ALLEN 2000 WEST LOC HOUSTON, TX 7	P SOUTH #1040		Title: Name: Address: City-St-Zip:	()	Change () Addition	
Title: Name: Address: City-St-Zip:	D () E WOLF, BERT 1101 FERGUSON HARLINGEN, TX			Title: Name: Address: City-St-Zip:	()	Change () Addition	
Title: Name: Address: City-St-Zip:	D ()E MARKOWITZ, GA 2000 WEST LOC HOUSTON, TX 7	ARY OP SOUTH #1040		Title: Name: Address: City-St-Zip:	()	Change () Addition	
Title: Name: Address: City-St-Zip:	D () E MISTAK, RONALI 711 WEST JACK HARLINGEN, TX	SON ST.		Title: Name: Address: City-St-Zip:	()	Change () Addition	
Title: Name: Address: City-St-Zip:	()	Delete		Title: Name: Address: City-St-Zip:	PETRUNICK, S	ST., NORTH, STE 305	

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: S. BLAKE PETRUNICK PRES 04/17/2009