

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000005430

FILED
Apr 15, 2009
Secretary of State

Entity Name: ABC PROSTHETICS & ORTHOTICS OF OSCEOLA, INC.

Current Principal Place of Business:

1815 S., DIVISION AVE
ORLANDO, FL 32805

New Principal Place of Business:

909 N. CENTRAL AVE
KISSIMMEE, FL 34741

Current Mailing Address:

1815 S., DIVISION AVE
ORLANDO, FL 32805

New Mailing Address:

115 W. COLUMBIA ST.
SUITE A
ORLANDO, FL 32806

FEI Number: 20-8210232

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SAUNDERS, LAURIE A
1815 S DIVISION AVE
ORLANDO, FL, FL 32805 US

Name and Address of New Registered Agent:

SAUNDERS, LAURIE A
115 W. COLUMBIA ST.
SUITE A
ORLANDO, FL 32806 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:

04/15/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SAUNDERS, SCOTT L
Address: 1815 S. DIVISION AVE
City-St-Zip: ORLANDO, FL 32805

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: SAUNDERS, SCOTT L
Address: 115 W. COLUMBIA ST. SUITE A
City-St-Zip: ORLANDO, FL 32806

Title: VP () Change (X) Addition
Name: SAUNDERS, LAURIE A
Address: 115 W. COLUMBIA ST.
City-St-Zip: ORLANDO, FL 32806

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: LAURIE SAUNDERS

VP

04/15/2009

Electronic Signature of Signing Officer or Director

Date