2012 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 23, 2012
Secretary of State

DOCUMENT# P08000085468

Entity Name: THE CAPSTONE MEDICAL PRODUCTS GROUP, INC.

Current Principal Place of Business:

334 ALLEN RD
PORTER CORNERS, NY 12859

New Principal Place of Business:

334 ALLEN RD
PORTER CORNERS, NY 12859 UN

Current Mailing Address:

334 ALLEN RD
PORTER CORNERS, NY 12859

New Mailing Address:

FEI Number: 30-0504609 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BABB - STEPHENS, LYNN
2446 NW 15 PLACE
GAINESVILLE, FL 32605 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

OFFICERS AND DIRECTORS:

Title: D
Name: BABB - STEPHENS, LYNN
Address: 334 ALLEN RD
City-St-Zip: PORTER CORNERS, NY 12859

Title: D
Name: COLLINS, SHIRLEY L
Address: 2446 NW 15 PLACE
City-St-Zip: GAINESVILLE, FL 32605

Title: D
Name: STEPHENS, GREGORY
Address: 334 ALLEN RD
City-St-Zip: PORTER CORNERS, NY 12859

I hereby 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 all other like empowered.

SIGNATURE: LYNN STEPHENS D 03/23/2012

Electronic Signature of Signing Officer or Director Date