## 2011 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P10000019594

Entity Name: THOMSON MEDICAL SUPPORT CORP

**FILED** Mar 18, 2011 Secretary of State

**New Principal Place of Business: Current Principal Place of Business:** 

1187 COUNTRYWIND DRIVE 1231 GREEN VALLEY CT APOPKA, FL 32703

APOPKA, FL 32703

**Current Mailing Address: New Mailing Address:** 

1187 COUNTRYWIND DRIVE 1231 GREEN VALLEY CT

APOPKA, FL 32703 APOPKA, FL 32703

FEI Number: 27-1975256 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

THOMSON, ROLAND THOMSON, ROLAND 1231 GREEN VALLEY CT 1187 COUNTRYWIND DRIVE APOPKA, FL 32703 APOPKA, FL 32703

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: 03/18/2011

> Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

Title:

THOMSON, ROLAND Name: 1187 COUNTRYWIND DRIVE Address: City-St-Zip: APOPKA, FL 32703

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: ROLAND W. THOMSON **PST** 03/18/2011