

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10000059317

FILED
Mar 24, 2011
Secretary of State

Entity Name: NMF, MEDICAL CORPORATION

Current Principal Place of Business:

1201 US HIGHWAY 1
SUITE 46
NORTH PALM BEACH, FL 33408

New Principal Place of Business:

321 SE OSCEOLA STREET
SUITE 102
STUART, FL 34994

Current Mailing Address:

1201 US HIGHWAY 1
SUITE 46
NORTH PALM BEACH, FL 33408

New Mailing Address:

321 SE OSCEOLA STREET
SUITE 102
STUART, FL 34994

FEI Number: 27-5554923

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PEARSON, ORIN F IV
1201 US HIGHWAY 1
SUITE 46
NORTH PALM BEACH, FL 33408 US

Name and Address of New Registered Agent:

PEARSON, ORIN F IV
321 OSCEOLA STREET
SUITE 102
STUART, FL 34994 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: ORIN FORD PEARSON

03/24/2011

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: CEO
Name: PEARSON, JULIE K
Address: 321 OSCEOLA STREET, SUITE 102
City-St-Zip: STUART, FL 34994

Title: PRES
Name: PEARSON, EDWARD W
Address: 321 OSCEOLA STREET, SUITE 102
City-St-Zip: STUART, FL 34994

Title: SEC
Name: PEARSON, ORIN F IV
Address: 321 OSCEOLA STREET, SUITE 102
City-St-Zip: STUART, FL 34994

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: ORIN FORD PEARSON IV

SEC

03/24/2011

Electronic Signature of Signing Officer or Director

Date