2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P29417

Current Principal Place of Business:

Entity Name: HOME DIAGNOSTICS, INC.

FILED Mar 20, 2009 Secretary of State

New Principal Place of Business:

2400 NW 55TH COURT FT. LAUDERDALE, FL 333092676 US	
Current Mailing Address:	New Mailing Address:
2400 NW 55TH COURT FT. LAUDERDALE, FL 333092676 US	
FEI Number: 22-2594392 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:
GEORGE, GODFREY VP 2400 NW 55TH CT. FORT LAUDERDALE, FL 33309 US	PETER, FEROLA S 500 CYPRESS CREEK ROAD 700 FORT LAUDERDALE, FL 33309 US
The above named entity submits this statement for the puin the State of Florida.	rpose of changing its registered office or registered agent, or both,
SIGNATURE: /S/ PETER S. FEROLA	03/20/2009
Electronic Signature of Registered Agen	nt Date
Election Campaign Financing Trust Fund Contribution ().	
OFFICERS AND DIRECTORS:	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:
Title: C () Delete Name: HOLLEY, GEORGE Address: 2400 NW 55TH CT City-St-Zin: FORT LAUDERDALE FL 33309	Title: () Change () Addition Name: Address: City-St-Zin:

Title:

Title:

Title:

Title:

Name:

Address:

City-St-Zip:

Name:

Address:

City-St-Zip:

Name:

Address:

City-St-Zip:

S,VP

RUBIN, RONALD

2400 NW 55TH CT

CAPPER, JOSEPH H

FORT LAUDERDALE, FL 33309

2400 NW 55TH CT

FT LAUDERDALE, FL 33309

(X) Change () Addition

() Change () Addition

(X) Change () Addition

() Change () Addition

() Delete Name: PARSON, DONALD 2400 NW 55TH CT Address:

Title:

Title:

Name:

Address:

City-St-Zip:

City-St-Zip: FORT LAUDERDALE, FL 33309

RUBIN. RONALD

2400 NW 55TH CT

() Delete

FT LAUDERDALE, FL 33309

Title: () Delete

DAMRON, J.RICHARD JR Name: Address: 2400 NW 55TH CT

City-St-Zip: FORT LAUDERDALE, FL 33309

Title: () Delete

GODFREY, GEORGE Name: Address: 2400 NW 55TH CT City-St-Zip:

Name: Address: FORT LAUDERDALE, FL 33309 City-St-Zip:

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/ RONALD L. RUBIN S,VP 03/20/2009