## 2011 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P93000026370

Entity Name: A PLUS MEDICAL EQUIPMENT & SUPPLY, INC.

FILED Apr 28, 2011 Secretary of State

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

719-2 WHITNEY AVE 3395 LAKE WORTH ROAD LANTANA, FL 33462 US

SUITE 5

PALM SPRINGS, FL 33461 US

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

P O BOX 3257

LANTANA, FL 334653257 US

FEI Number: 65-0400467 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:

BLEDSOE, DAVID V BLEDSOE, DAVID V 719-2 WHITNEY AVE 3395 LAKÉ WORTH ROAD LANTANA, FL 33462 US SUITE 5

PALM SPRINGS, FL 33461 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: 04/28/2011

> Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

Title:

BLEDSOE, KAREN C Name: 2775 POINTE CIRCLE Address: City-St-Zip: GREENACRES, FL 33413

Title:

Name: BLEDSOE, DAVID V Address: 2775 POINTE CIRCLE GREENACRES, FL 33413 City-St-Zip:

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: KAREN C BLEDSOE **PRES** 04/28/2011