2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000045240

Entity Name: RESPIRATORY SUPPORT SERVICES, INC.

FILED Jan 04, 2008 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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3550 SW 74TH AVENUE SUITE D OCALA, FL 34474

Current Mailing Address: New Mailing Address:

PO BOX 772098 OCALA, FL 344772098 US

FEI Number: 59-3186496 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:

DEVITO, ROBERT JR

3807 SE 38TH LOOP

3977 SE 40TH STREET

OCALA, FL 34480 US

DEVITO, ROBERT JR

3977 SE 40TH STREET

OCALA, FL 34480 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: 01/04/2008

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition
Name: DEVITO, ROBERT JR. Name: DEVITO, ROBERT JR.
Address: 3807 SE 38TH LOOP Address: 3977 SE 40TH STREET

 3807 SE 38TH LOOP
 Address:
 3977 SE 40TH STREET

 OCALA, FL 34480
 City-St-Zip:
 OCALA, FL 34480

Title: VPTD () Delete Title: () Change () Addition

 Name:
 DEVITO, GERTRUD
 Name:

 Address:
 3044 SW 41ST LANE
 Address:

 City-St-Zip:
 OCALA, FL 34474
 City-St-Zip:

Title: S () Delete Title: S (X) Change () Addition

 Name:
 DEVITO, CHRISTINE
 Name:
 DEVITO, CHRISTINE

 Address:
 3807 SE 38TH LOOP
 Address:
 3977 SE 40TH STREET

 City-St-Zip:
 OCALA, FL 34480
 City-St-Zip:
 OCALA, FL 34480

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: CHRISTINE DEVITO S 01/04/2008