

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000050101

FILED
May 03, 2010
Secretary of State

Entity Name: HOME PATIENT SUPPLY, INC.

Current Principal Place of Business:

4018 SOUTH SEMORAN BLVD
ORLANDO, FL 32822

New Principal Place of Business:

Current Mailing Address:

4018 SOUTH SEMORAN BLVD
ORLANDO, FL 32822

New Mailing Address:

FEI Number: 59-3164135

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ESPINEL, BINETTE L
7006 STAPOINT CT.
UNIT D
WINTER PARK, FL 32792 US

Name and Address of New Registered Agent:

ESPINEL, BINETTE L
4018 S SEMORAN BLVD
ORLANDO, FL 32822 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:

05/03/2010

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PRES
Name: ESPINEL, BINETTE
Address: 5039 QUALITY TRAIL
City-St-Zip: ORLANDO, FL 32829 US

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: BINETTE ESPINEL

PRES

05/03/2010

Electronic Signature of Signing Officer or Director

Date