2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2007
Secretary of State

DOCUMENT# P96000078922

Entity Name: INDUSTRIAL HEALTH SOLUTIONS, P.A.

Current Principal Place of Business:

870 SW MARTIN DOWNS BLVD
#1
PALM CITY, FL 34990 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 680
PALM CITY, FL 34991 US

New Mailing Address:

FEI Number: 59-3401720 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HANSBROUGH, BRUCE A
870 S.W. MARTIN DOWNS BLVD
#1
PALM CITY, FL 34990 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: HANSBROUGH, BRUCE A
Address: 870 SW MARTIN DOWNS BLVD STE 1
City-St-Zip: PALM CITY, FL 34990

Title: VP ( ) Delete
Name: HANSBROUGH, NANCY
Address: 11764 SW VALENCIA CT
City-St-Zip: PALM CITY, FL 34990

Title: S ( ) Delete
Name: MORSE, PATRICIA
Address: 1728 SHOSHONEE TR
City-St-Zip: CASSELBERRY, FL 32707

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
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: B.A. HANSBROUGH PD 04/27/2007

Electronic Signature of Signing Officer or Director Date