2009 FOR PROFIT CORPORATION ANNUAL REPORT

Electronic Signature of Registered Agent

DOCUMENT# P97000014433

Entity Name: PATRIOT MEDICAL, INC.

FILED Mar 20, 2009 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
770-B PASADENA AVE S. SOUTH PASADENA, FL 33707	310 MAIN ST SAFETY HARBOR, FL 34695
Current Mailing Address:	New Mailing Address:
770-B PASADENA AVE S. SOUTH PASADENA, FL 33707	310 MAIN ST. SAFETY HARBOR, FL 34695
FEI Number: 59-3421191 FEI Number Applied For () FEI Num	nber Not Applicable () Certificate of Status Desired ()
Name and Address of Current Registered Agent:	Name and Address of New Registered Agent:
LE GATH, MICHAEL S. 770-B PASADENA AVE S. SOUTH PASADENA, FL 33707 US	LE GATH, MICHAEL S. 310 MAIN ST. SAFETY HARBOR, FL 34695 US
The above named entity submits this statement for the purpose o in the State of Florida.	f changing its registered office or registered agent, or both,

LEGATH, MICHAEL S

LEGATH, PAMELA L

LEGATH, JODI

2166 DIANE CT

770-B PASADENA AVE S.

770-B PASADENA AVE S.

CLEARWATER, FL 33756

SOUTH PASADENA, FL 33707

SOUTH PASADENA, FL 33707

Election Campaign Financing Trust Fund Contribution ().

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OFFICERS AND DIRECTORS:

SIGNATURE:

Title:

Title:

Title:

Name:

Address: City-St-Zip:

Name:

Address:

City-St-Zip:

Name:

Address: City-St-Zip: Title: D (X) Change () Addition

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

03/20/2009

Date

Name: LEGATH, MICHAEL S

Address: 310 MAIN ST.

City-St-Zip: SAFETY HARBOR, FL 34695

Name: LEGATH, PAMELA L

Address: 310 MAIN ST.

City-St-Zip: SAFETY HARBOR, FL 34695

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: MICHAEL S LEGATH D 03/20/2009