

# **2010 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P97000028208

**Entity Name:** PREMIER PULMONARY SERVICES, INC.

**FILED**  
**Feb 03, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

1615 RIDGEWOOD AVENUE #C-107A  
HOLLY HILL, FL 32117

**New Principal Place of Business:**

**Current Mailing Address:**

1615 RIDGEWOOD AVENUE #C-107A  
HOLLY HILL, FL 32117

**New Mailing Address:**

FEI Number: 59-3439345      FEI Number Applied For (  )      FEI Number Not Applicable (  )      Certificate of Status Desired (  )

**Name and Address of Current Registered Agent:**

INGHAM, IV, HOWARD M  
701 BIG TREE ROAD  
SOUTH DAYTONA, FL 32119    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  
Name: ELAM, BERT A  
Address: 5575 MILES DR  
City-St-Zip: PORT ORANGE, FL 32127

Title: DST  
Name: INGHAM, HOWARD M IV  
Address: 701 BIG TREE ROAD  
City-St-Zip: SOUTH DAYTONA, FL 32119

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: BERT ELAM

PRES

02/03/2010

Electronic Signature of Signing Officer or Director

Date