

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000057612

FILED  
Apr 26, 2008  
Secretary of State

**Entity Name:** TRUST HOME MEDICAL EQUIPMENT AND SUPPLY, INC.

**Current Principal Place of Business:**

8720 SW HIGHWAY 200  
10  
OCALA, FL 34481

**New Principal Place of Business:**

**Current Mailing Address:**

8720 SW HIGHWAY 200  
10  
OCALA, FL 34481

**New Mailing Address:**

**FEI Number:** 59-3456334      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

THORNTON, JEANNE M P  
6185 SE 46 AVE RD  
STE. 10  
OCALA, FL 34480 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: P ( ) Delete  
Name: THORNTON, JEANNE M  
Address: 6185 SE 46 AVE RD  
City-St-Zip: Ocala, FL 34480

Title: VP ( ) Delete  
Name: THORNTON, ANTHONY M  
Address: 8064 SW 108TH STREET  
City-St-Zip: Ocala, FL 34481

Title: SEC ( ) Delete  
Name: THORNTON, JEANNE M  
Address: 4620 SW 129TH PLACE  
City-St-Zip: Ocala, FL 34473

Title: DIR ( ) Delete  
Name: PIKE, TIMOTHY F  
Address: 4401 SW 152ND STREET  
City-St-Zip: Ocala, FL 34473

Title: DIR ( ) Delete  
Name: THORNTON, ANTHONY M  
Address: 8064 SW 108TH STREET  
City-St-Zip: Ocala, FL 34481

Title: DIR ( ) Delete  
Name: THORNTON, ANTHONY J  
Address: 7225 SUNSET AVE  
City-St-Zip: PANAMA CITY BEACH, FL 32408

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

Title: SEC (X) Change ( ) Addition  
Name: THORNTON, JEANNE M  
Address: 6185 SE 46 AVE. RD.  
City-St-Zip: Ocala, FL 34480

Title: DIR (X) Change ( ) Addition  
Name: PIKE, TIMOTHY F  
Address: 14220 GRAMATAN AVE  
City-St-Zip: CLEVELAND, OH 44111

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: ANTHONY M THORNTON

DIR

04/26/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date