2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000098969

Entity Name: MOBILITY SCOOTER CENTER, INC.

FILED Feb 10, 2009 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:

748 N. HARBOR CITY BOULEVARD MELBOURNE, FL 32935

Current Mailing Address: New Mailing Address:

748 N. HARBOR CITY BOULEVARD MELBOURNE, FL 32935

FEI Number: 59-3349474 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

RUDOLPH, ROBERT P 748 N. HARBOR CITY BOULEVARD MELBOURNE, FL 32935 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:

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition RUDOLPH, ROBERT P RUDOLPH, ROBERT P Name: Name: 748 N. HARBOR CITY BLVD 748 N. HARBOR CITY BLVD Address: Address: MELBOURNE, FL 32935 City-St-Zip: MELBOURNE, FL 32935 City-St-Zip:

Title: D () Delete Title: ODP (X) Change () Addition Name: RUDOLPH, ELEANOR J Name: RUDOLPH, ELEANOR J Address: 748 N. HARBOR CITY BLVD Address: 748 N. HARBOR CITY BLVD

Address: 748 N. HARBOR CITY BLVD Address: 748 N. HARBOR CITY BLVE
City-St-Zip: MELBOURNE, FL 32935 City-St-Zip: MELBOURNE, FL 32935

Title: D () Delete Title: ODM (X) Change () Addition Name: KELLNER, PAUL Name: KELLNER, PAUL

Address: 748 N. HARBOR CITY BLVD Address: 748 N. HARBOR CITY BLVD

City-St-Zip: MELBOURNE, FL 32935 City-St-Zip: MELBOURNE, FL 32935

Title: D () Delete Title: ODM (X) Change () Addition Name: KELLNER, STEVEN Name: KELLNER, STEVEN Address: 748 N. HARBOR CITY BLVD Address: 748 N. HARBOR CITY BLVD

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Address: 748 N. HARBOR CITY BLVD
MELBOURNE, FL 32935

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: ROBERT P RUDOLPH ODV 02/10/2009