

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000088028

FILED
Apr 17, 2009
Secretary of State

Entity Name: INTERMED ULTRASOUND SERVICES, INC.

Current Principal Place of Business:

13351 PROGRESS BLVD
ALACHUA, FL 32615

New Principal Place of Business:

Current Mailing Address:

13351 PROGRESS BLVD
ALACHUA, FL 32615

New Mailing Address:

FEI Number: 59-3537216 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FLETCHER, DON
13351 PROGRESS BLVD
ALACHUA, FL 32615 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: FLETCHER, DON
Address: 13351 PROGRESS BLVD
City-St-Zip: ALACHUA, FL 32615

Title: V () Delete
Name: STAAB, RICK
Address: 6319 SW 37TH WAY
City-St-Zip: GAINESVILLE, FL 32608

Title: S () Delete
Name: BAUERLE, DAVE
Address: 13126 NW 19TH PLACE
City-St-Zip: GAINESVILLE, FL 32606

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: THERESA A SMITH

A/P

04/17/2009

Electronic Signature of Signing Officer or Director

_____ Date