

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000100925

FILED  
May 19, 2009  
Secretary of State

Entity Name: SUNBELT MEDICAL SUPPLY & OXYGEN, INC.

## Current Principal Place of Business:

4502 35TH ST  
SUITE 100  
ORLANDO, FL 32811

## New Principal Place of Business:

## Current Mailing Address:

4502 35TH ST  
SUITE 100  
ORLANDO, FL 32811

## New Mailing Address:

3325 BARTLETT BLVD  
ORLANDO, FL 32811

FEI Number: 65-1115789

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

FRY, THOMAS J  
1245 OAKDALE ST  
WINDERMERE, FL 34786 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PRES ( ) Delete  
Name: FRY, JOANNE Q  
Address: 4502 35TH ST, STE 100  
City-St-Zip: ORLANDO, FL 32811

Title: VP ( ) Delete  
Name: FRY, THOMAS J  
Address: 4502 35TH ST, SUITE 100  
City-St-Zip: ORLANDO, FL 32811

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change ( ) Addition  
Name: GRIGGS, STEPHEN  
Address: 3325 BARTLETT BLVD  
City-St-Zip: ORLANDO, FL 32811

Title: VP (X) Change ( ) Addition  
Name: RUSSELL, JOSEPH  
Address: 3325 BARTLETT BLVD  
City-St-Zip: ORLANDO, FL 32811

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: JOSEPH RUSSELL

VP

05/19/2009

Electronic Signature of Signing Officer or Director

Date