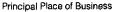


DOCUMENT # P99000086772

EXCALIBUR AUDIOLOGY AND HEARING AID SERVICES.

INC.



3519 N. LECANTO HWY **BEVERLY HILLS, FL 34465**



FILED Apr 24, 2008 08:00 AN Secretary of State

Mailing Address

3519 N. LECANTO HWY BEVERLY HILLS, FL 34465



DO NOT WRITE IN THIS SPACE

No Chg-P CR2E034 (11/05) 04082008 Applied For 4. FEI Number Not Applicable 59-3599842

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

DITCHFIELD, DAVID 4524 WEST PINTO LOOP BEVERLY HILLS, FL 34465

DO NOT WRITE IN THIS SPACE

	named entity submits this statement for the $\boldsymbol{\rho}$ ions of registered agent.	ourpose of changing its registere	ed office or r	egistered agent, or bo	th, in the State of Florida. I am familiar with, and accept
SIGNATURE.	Signature, typed or printed name of registered agent and title I	If applicable. (NOTE: Registere	d Agent signature	required when roinstating)	DATE
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00		9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution.		•	
10.	OFFICERS AND DIREC	CTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P DITCHFIELD, DAVID W 4524 W. PINTO LOOP BEVERLY HILLS, FL 34465				
TITLE NAME STREET ADDRESS CITY-ST-ZIP					U00000917754 05/13/08-80054-015 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		,		in ⁻	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS					

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address

CITY-ST-ZIP

DITCHFIELD カねいり

4/20/08 (352) 746-1133