

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # S93267 (0)

1. Corporation Name

OXY-MED PULMONARY HOME CARE SERVICE & SUPPLY, INC.



Principal Place of Business

Mailing Address

501 VILLAGE GREEN PARKWAY
SUITE 2
BRADENTON FL 34209
US

2207 79TH ST CRT W
BRADENTON FL 34209

3. Date Incorporated or Qualified
11/12/1991

3a. Date of Last Report
04/24/1995

2. Principal Place of Business

2a. Mailing Address

21. 501 VILLAGE GREEN PARKWAY

26. 9604 CORTEZ RD.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22. #1

27. S/R-126

City & State

City & State

23. BRADENTON, FL.

28. BRADENTON, FL 3

Zip

Country

Zip

Country

24. 34209

25. MARATEE

29. 34210

30. MARATEE

9. Name and Address of Current Registered Agent

4. FEI Number
65-0297153

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☒ Yes ☐ No

10. Name and Address of New Registered Agent

HOLT, ADRICK L. & SHERI R.
2207 79TH ST CRT W
BRADENTON FL 34209

81. Name

82. Street Address (P.O. Box Number is Not Acceptable)

83.

84. City

FL

85. Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Shirley R. Holt

(NOTE: Registered Agent signature required when reinstating)

4-1-96

DATE

12. OFFICERS AND DIRECTORS

TITLE P ☐ DELETE
NAME HOLT, ADRICK L.
STREET ADDRESS 2207 79TH ST CRT W
CITY-ST-ZIP BRADENTON FL

TITLE VP ☐ DELETE
NAME HOLT, SHERI R.
STREET ADDRESS 2207 79TH ST CRT W
CITY-ST-ZIP BRADENTON FL

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Shirley R. Holt

Date:

Daytime Phone #

4-1-96 (745-9297) (745-9297)

CR2E034 (12/95)