

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V51736

FILED
Apr 11, 2012
Secretary of State

Entity Name: LCM MEDICAL, INC.

Current Principal Place of Business:

296 SOUTH MILITARY TRAIL
DEERFIELD BEACH, FL 32901 US

New Principal Place of Business:

296 SOUTH MILITARY TRAIL
DEERFIELD BEACH, FL 33442 US

Current Mailing Address:

296 SOUTH MILITARY TRAIL
DEERFIELD BEACH, FL 32901 US

New Mailing Address:

296 SOUTH MILITARY TRAIL
DEERFIELD BEACH, FL 33442 US

FEI Number: 65-0349500

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SANGREE, MARK L.
296 SOUTH MILITARY TRAIL
DEERFIELD BEACH, FL 33442 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

OFFICERS AND DIRECTORS:

Title: PD
Name: THOMPSON, LARRY W.
Address: 1333 GATEWAY DR #1022
City-St-Zip: MELBOURNE, FL 32901

Title: V
Name: SANGREE, MARK
Address: 296 SOUTH MILITARY TRAIL
City-St-Zip: DEERFIELD BEACH, FL 33442

Title: V
Name: JUSTICE, CINDY
Address: 1333 GATEWAY DR., SUITE 1022
City-St-Zip: MELBOURNE, FL 32901 US

I hereby 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 all other like empowered.

SIGNATURE: MARK L. SANGREE

V

04/11/2012

Electronic Signature of Signing Officer or Director

_____ Date