

2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S39145

Entity Name: PRECISION MEDICAL, INC.

Current Principal Place of Business:

9216 PALM RIVER RD
SUITE 205
TAMPA, FL 33619

Current Mailing Address:

9216 PALM RIVER RD
SUITE 205
TAMPA, FL 33619

FEI Number: 59-3060620

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MILLS, FREDERICK JESQ
C/O MORRISON & MILLS, PA
1200 WEST PLATT STREET SUITE 100
TAMPA, FL 33606 US

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

Officer/Director Detail :

Title PSD
Name ETHERIDGE, GEORGE W.
Address 9216 PALM RIVER RD
City-State-Zip: TAMPA FL 33619

Title STD
Name ETHERIDGE, LISA O.
Address 9216 PALM RIVER RD
City-State-Zip: TAMPA FL 33619

Title VS
Name MIRABELLA, CHARLES
Address 9216 PALM RIVER ROAD # 205
City-State-Zip: TAMPA FL 33619

Title VS
Name ROBINSON, FRANK
Address 9216 PALM RIVER ROAD # 205
City-State-Zip: TAMPA FL 33619

Title VS
Name HAWKINS, JOHN
Address 9216 PALM RIVER ROAD # 205
City-State-Zip: TAMPA FL 33619

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: GEORGE ETHERIDGE

PRESIDENT

02/18/2013

Electronic Signature of Signing Officer/Director Detail

Date