

1.) CORPORATION NAME: SOUTHERN HOME RESPIRATORY & EQUIPMENT, INC. 2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: THOMAS ROTHE 282 WESTGATE MALL CIR., STE 117 PENNINGTON GAP, VA	DUE DATE: 3/31/2015 SCC ID NO: 05924212 5.) STOCK INFORMATION <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:50%;">CLASS</td> <td style="width:50%;">AUTHORIZED</td> </tr> <tr> <td>COMMON</td> <td>1,000</td> </tr> </table>	CLASS	AUTHORIZED	COMMON	1,000
CLASS	AUTHORIZED				
COMMON	1,000				
3.) CITY OR COUNTY OF VA REGISTERED OFFICE: LEE COUNTY					
4.) STATE OR COUNTRY OF INCORPORATION: VA					

6.) PRINCIPAL OFFICE ADDRESS: ADDRESS: 282 WESTGATE MALL CIR., STE 117 CITY/ST/ZIP: PENNINGTON GAP, VA 24277-2879

7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

NAME: STEPHEN P GRIGGS TITLE: PRESIDENT ADDRESS: 3325 BARTLETT BLVD CITY/ST/ZIP/CO: ORLANDO, FL 32811	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR	
NAME: JOSEPH P RUSSELL TITLE: VICE PRESIDENT ADDRESS: 3325 BARTLETT BLVD CITY/ST/ZIP/CO: ORLANDO, FL 32811	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR	
NAME: MARY BETH COVEY TITLE: SECRETARY ADDRESS: 3325 BARTLETT BLVD CITY/ST/ZIP/CO: ORLANDO, FL 32811	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR	

I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.

/s/ JOSEPH P RUSSELL	JOSEPH P RUSSELL, VICE PRESIDENT	3/9/2015
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	PRINTED NAME AND CORPORATE TITLE	DATE

It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.