

1.) CORPORATION NAME:

Medic-Aire Medical Equipment, Inc.

DUE DATE: **6/30/2011**

SCC ID NO: **F1710955**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: **B.E.**

**AUTH IN VI
NATIONAL REGISTERED AGENTS, INC.
SUITE 140
201 N UNION STREET**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	10,000

ALEXANDRIA, VA 22314

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

ALEXANDRIA CITY

4.) STATE OR COUNTRY OF INCORPORATION:

FL

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 2600 TECHNOLOGY DRIVE
SUITE 300

CITY/ST/ZIP: ORLANDO, FL 32804-

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: PHILIP L CARTER
TITLE: PRESIDENT
ADDRESS: 2600 TECHNOLOGY DRIVE
SUITE 300
CITY/ST/ZIP/CO: ORLANDO, FL 32804-

OFFICER

DIRECTOR

NAME: MICHAEL R DOBBS
TITLE: VICE PRESIDENT
ADDRESS: 2600 TECHNOLOGY DRIVE
SUITE 300
CITY/ST/ZIP/CO: ORLANDO, FL 32804-

OFFICER

DIRECTOR

NAME: STEVEN P ALSENE
TITLE: TREASURER
ADDRESS: 2600 TECHNOLOGY DRIVE
SUITE 300
CITY/ST/ZIP/CO: ORLANDO, FL 32804-

OFFICER

DIRECTOR

NAME: REBECCA L MYERS
TITLE: SECRETARY
ADDRESS: 2600 TECHNOLOGY DRIVE
SUITE 300
CITY/ST/ZIP/CO: ORLANDO, FL 32804-

OFFICER

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.

<u>/s/ REBECCA L MYERS</u>	<u>REBECCA L MYERS, SECRETARY</u>	<u>6/20/2011</u>
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.