

SCC eFile

2013 ANNUAL REPORT
COMMONWEALTH OF VIRGINIA
STATE CORPORATION COMMISSION

213550797

1.) CORPORATION NAME:

Orbit Medical of Portland, Inc.

DUE DATE: **1/31/2013**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**BUSINESS FILINGS INCORPORATED
4701 COX RD STE 301
GLEN ALLEN, VA 23060**

SCC ID NO: **F1777558**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	1,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

HENRICO COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

UT

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 4424 S 700 E STE 200

CITY/ST/ZIP: SALT LAKE CITY, UT 84107

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.

		<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	SHAWN ROSS		
TITLE:	PRES, SECR		
ADDRESS:	11429 CAMDEN PARK LANE		
CITY/ST/ZIP/CO:	DRAPER, UT 84020		

		<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	ROB GALLUP		
TITLE:	CEO, TREASURER		
ADDRESS:	13278 S ASHWOOD GLEN DR		
CITY/ST/ZIP/CO:	DRAPER, UT 84020		

		<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	ROB GALLUP		
TITLE:	CHAIRMAN		
ADDRESS:	13278 S ASHWOOD GLEN DR		
CITY/ST/ZIP/CO:	DRAPER, UT 84020		

		<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	SHAWN ROSS		
TITLE:	DIRECTOR		
ADDRESS:	11429 CAMDEN PARK LANE		
CITY/ST/ZIP/CO:	DRAPER, UT 84020		

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/ SHAWN ROSS	SHAWN ROSS, PRES, SECR	11/21/2012
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.