

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P36254** (1)
1. Corporation Name
KCI NEW TECHNOLOGIES, INC.

APPROVED
AND
FILED

95 MAR 21 PM 4:11

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE.

Principal Place of Business
8023 VANTAGE DRIVE, SUITE 530
P.O. BOX 8587
SAN ANTONIO TX 78230

Mailing Address
8023 VANTAGE DRIVE, SUITE 530
P.O. BOX 8587
SAN ANTONIO TX 78230

3. Date Incorporated or Qualified
11/12/1991

3a. Date of Last Report
04/21/1994

2. Principal Place of Business		2a. Mailing Address	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.
22	City & State	27	City & State
23	Zip	28	Country
24	Country	29	Zip
25	Country	30	Country

4. FEI Number
74-2615226

Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Election Campaign Financing Trust Fund Contribution **\$5.00 May Be Added to Fees**

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes Yes No

9. Name and Address of Current Registered Agent
**CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324**

10. Name and Address of New Registered Agent

81	Name
82	Street Address (P.O. Box Number is Not Acceptable)
83	
84	City
85	Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE	P
NAME	PUCHEK, DANIEL R.
STREET ADDRESS	117 GRANDOAK
CITY-ST-ZIP	SAN ANTONIO TX
TITLE	VS
NAME	WEHRMEYER, ROBERT A., JR
STREET ADDRESS	29302 GRAND COTEAU
CITY-ST-ZIP	BOERNE TX
TITLE	VT
NAME	THATCHER, KEITH D.
STREET ADDRESS	12727 CASTLE BEND
CITY-ST-ZIP	SAN ANTONIO TX
TITLE	D
NAME	LEININGER, JAMES R., MD
STREET ADDRESS	200 CANADA VERDE
CITY-ST-ZIP	SAN ANTONIO TX
TITLE	D
NAME	LEININGER, PETER A., MD
STREET ADDRESS	103 TOMAHAWK LANE
CITY-ST-ZIP	SAN ANTONIO TX
TITLE	D
NAME	WEHRMEYER, RPBERT A., JR
STREET ADDRESS	29302 GRANT COTEAU
CITY-ST-ZIP	BOERNE TX

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	Position Open at Time of Filing
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	Bianca Rhodes
4.3 STREET ADDRESS	15915 Wolf Creek
4.4 CITY-ST-ZIP	San Antonio, TX 78232
5.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	Dennis E Noll
5.3 STREET ADDRESS	14926 Eminence
5.4 CITY-ST-ZIP	San Antonio, TX 78248
6.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	Frank Dilazzaro
6.3 STREET ADDRESS	16203 Robinwood Lane
6.4 CITY-ST-ZIP	San Antonio, TX 78248

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the trustee or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13, as changed, or on the attached list with my address.

SIGNATURE: *Daniel R. Puchek* Daniel R. Puchek, President March 15, 1995
(Signature and Type or Printed Name of Signing Officer or Director) (Date) (Signature Place #)