

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000074523

FILED
Apr 05, 2007
Secretary of State

Entity Name: LIBERATOR SERVICES CORPORATION

Current Principal Place of Business:

4260 SE FEDERAL HWY
STUART, FL 34997

New Principal Place of Business:

Current Mailing Address:

4260 SE FEDERAL HWY
STUART, FL 34997

New Mailing Address:

FEI Number: 20-2858449

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

LIBRATORE, MARK
2051 SE RIVERSIDE RD
STUART, FL 34996 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: DAVIS, ROBERT J
Address: 4260 SE FEDERAL HWY
City-St-Zip: STUART, FL 34997

Title: DST () Delete
Name: LIBRATORE, MARK
Address: 4260 SE FEDERAL HWY
City-St-Zip: STUART, FL 34997

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DST (X) Change () Addition
Name: DAVIS, ROBERT J
Address: 4260 SE FEDERAL HWY
City-St-Zip: STUART, FL 34997

Title: DP (X) Change () Addition
Name: LIBRATORE, MARK
Address: 4260 SE FEDERAL HWY
City-St-Zip: STUART, FL 34997

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: ROBERT J. DAVIS

SEC

04/05/2007

Electronic Signature of Signing Officer or Director

_____ Date