

2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000074523

Entity Name: LIBERATOR HEALTH AND EDUCATION SERVICES, INC.

Current Principal Place of Business:

2979 SE GRAN PARK WAY
STUART, FL 34997

Current Mailing Address:

2979 SE GRAN PARK WAY
STUART, FL 34997

FEI Number: 20-2858449

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

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

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

Officer/Director Detail :

Title	DST	Title	DP
Name	DAVIS, ROBERT J	Name	LIBRATORE, MARK
Address	2979 SE GRAN PARK WAY	Address	2979 SE GRAN PARK WAY
City-State-Zip:	STUART FL 34997	City-State-Zip:	STUART FL 34997

I hereby 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 all other like empowered.

SIGNATURE: ROBERT J DAVIS

CFO

01/31/2014

Electronic Signature of Signing Officer/Director Detail

Date