

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F99000003479

FILED
Jan 30, 2008
Secretary of State

Entity Name: A. ACCUCHECK, INC. OF NEW YORK

Current Principal Place of Business:

31 ONTARIO STREET
COHOES, NY 12047

New Principal Place of Business:

Current Mailing Address:

31 ONTARIO STREET
COHOES, NY 12047

New Mailing Address:

FEI Number: 14-1746039 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

REEDY, MICHAEL
305 N PARSONS AVE
BRANDON, FL 33510 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: CEO () Delete
Name: FRETTO, CHERIE M
Address: 125 MOBBLY BAY DRIVE
City-St-Zip: OLDSMAR, FL 34677

Title: PRES () Delete
Name: PAILLEY, BARBARA J
Address: 2800 SUN GLOW WAY
City-St-Zip: CLEARWATER, FL 33761

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change () Addition
Name: PAILLEY, BARBARA J
Address: 2800 SUN GLOW WAY
City-St-Zip: CLEARWATER, FL 33761

Title: SEC () Change (X) Addition
Name: FRETTO, TAMI T
Address: 265 MYRTLE CT
City-St-Zip: PALM HARBOR, FL 34683

Title: TR () Change (X) Addition
Name: FOWLER, KIMBERLY M
Address: 3439 ROLLING TRAIL
City-St-Zip: PALM HARBOR, FL 34684

I hereby certify that the information supplied with this filing does not qualify 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: KIMBERLY M. FOWLER

TR

01/30/2008

Electronic Signature of Signing Officer or Director

_____ Date