

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000060186

Entity Name: BPS MEDTECH, LLC

FILED
Feb 18, 2009
Secretary of State

Current Principal Place of Business:

9159 GREAT HERON CIRCLE
ORLANDO, FL 32836

New Principal Place of Business:

9159 GREAT HERON CIRCLE
ORLANDO, FL 32836 US

Current Mailing Address:

% A.G.C. CO.
200 SOUTH ORANGE AVENUE, STE. 2300
ORLANDO, FL 32801

New Mailing Address:

9159 GREAT HERON CIRCLE
ORLANDO, FL 32836 US

FEI Number: 26-2900876

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

A.G.C. CO.
200 SOUTH ORANGE AVENUE, STE. 2300
ORLANDO, FL 32801 US

Name and Address of New Registered Agent:

CAPITOL CORPORATE SERVICES, INC.
155 OFFICE PLAZA DR.
STE A
TALLAHASSEE, FL 32301 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: DELANIE CASE

02/18/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

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

ADDITIONS/CHANGES:

Title: DR. () Change (X) Addition
Name: BULLARD, TIMOTHY B
Address: 9159 GREAT HERON CIRCLE
City-St-Zip: ORLANDO, FL 32836 US

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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: TIMOTHY B BULLARD

DR.

02/18/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date