

2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000088802

FILED
Feb 16, 2010
Secretary of State

Entity Name: SHARPE MEDICAL SALES, LLC

Current Principal Place of Business:

2606 SW 20TH CIRCLE
OCALA, FL 34471

New Principal Place of Business:

Current Mailing Address:

2606 SW 20TH CIRCLE
OCALA, FL 34471

New Mailing Address:

FEI Number: 26-3536060

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SHARPE, DANA L
2606 SW 20TH CIRCLE
OCALA, FL 34471 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

MANAGING MEMBERS/MANAGERS:

Title: MGMR
Name: SHARPE, DANIEL P
Address: 2606 SW 20TH CIRCLE
City-St-Zip: OCALA, FL 34471

I hereby 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: DANIEL P. SHARPE

MGMR

02/16/2010

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