2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L72305

FILED Apr 18, 2007 Secretary of State

Entity Name: LIBERTY MEDICAL SUPPLY, INC.

-				
Current Princ	cipal Place of Business:	New Principal Place of Bu	siness:	
3883 LIBERTY SUITE 250	Y LANE			
	LUCIE, FL 34952 US			
Current Maili	ing Address:	New Mailing Address:		
P O BOX 9649 PORT ST LUC	9 CIE, FL 34985 US			
El Number: 65-	-0193983 FEI Number Applied For ()	FEI Number Not Applicable ()	ertificate of Status Desired ()	
Name and Address of Current Registered Agent:		: Name and Address of New	Name and Address of New Registered Agent:	
	RATION SYSTEM PINE ISLAND ROAD I, FL 33324 US			
		he purpose of changing its registered office	e or registered agent, or both,	
n the State of	Florida.	he purpose of changing its registered office	e or registered agent, or both,	
n the State of	Florida.		e or registered agent, or both, Date	
n the State of SIGNATURE:	Florida.			
n the State of BIGNATURE:	Florida. Electronic Signature of Registered	Agent		
n the State of SIGNATURE: Election Campai OFFICERS AI Fitle: P Name: FA Address: 10	Electronic Signature of Registered sign Financing Trust Fund Contribution (). ND DIRECTORS:	Agent ADDITIONS/CHANGES TO	Date	

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: DEVIN J. ANDERSON 04/18/2007 D