2003 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 21, 2003
Secretary of State

DOCUMENT# P02000010516

Entity Name: LIBERTY RECOVERY SERVICES, INC.

Current Principal Place of Business:

200 KNUTH ROAD, SUITE 242
BOYNTON BEACH, FL 33436

New Principal Place of Business:

200 KNUTH ROAD, SUITE 100
BOYNTON BEACH, FL 33436

Current Mailing Address:

200 KNUTH ROAD, SUITE 242
BOYNTON BEACH, FL 33436

New Mailing Address:

200 KNUTH ROAD, SUITE 100
BOYNTON BEACH, FL 33436

FEI Number: **FEI Number Applied For (X)** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

NORDT, GREGORY M ESQ.
GREENSPOON, MARDER, HIRSCHFELD, RAFKIN
100 WEST CYPRESS CREEK ROAD SUITE 700
FORT LAUDERDALE, FL 33309 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: D ( ) Delete
Name: IZARD, WARREN
Address: 200 KNUTH ROAD, SUITE 242
City-St-Zip: BOYNTON BEACH, FL 33436

Title: D ( ) Delete
Name: IZARD, KIRK
Address: 200 KNUTH ROAD, SUITE 242
City-St-Zip: BOYNTON BEACH, FL 33436

Title: D ( ) Delete
Name: BURRUANO, AL
Address: 200 KNUTH ROAD, SUITE 242
City-St-Zip: BOYNTON BEACH, FL 33436

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: WARREN P. IZARD D 04/21/2003

Electronic Signature of Signing Officer or Director — Date