

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P13077

FILED
May 17, 2007
Secretary of State

Entity Name: MTS MEDICATION TECHNOLOGIES, INC.

Current Principal Place of Business:

2003 GANDY BLVD. NORTH
SUITE 800
SAINT PETERSBURG, FL 33702

New Principal Place of Business:

Current Mailing Address:

2003 GANDY BLVD. NORTH
SUITE 800
SAINT PETERSBURG, FL 33702

New Mailing Address:

FEI Number: 59-2740462 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SIEGEL, TODD E
2003 GANDY BLVD. NORTH
SUITE 800
SAINT PETERSBURG, FL 33702 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: SIEGEL, TODD E
Address: 2003 GANDY BLVD, SUITE 800
City-St-Zip: SAINT PETERSBURG, FL 33702

Title: D () Delete
Name: KAZARIAN, DAVID
Address: 2003 GANDY BLVD, SUITE 800
City-St-Zip: SAINT PETERSBURG, FL 33702

Title: D () Delete
Name: STANTON, JOHN
Address: 2003 GANDY BLVD, SUITE 800
City-St-Zip: SAINT PETERSBURG, FL 33702

Title: D () Delete
Name: NEWMAN, FRANK
Address: 2003 GANDY BLVD, SUITE 800
City-St-Zip: SAINT PETERSBURG, FL 33702

Title: D () Delete
Name: BRASWELL, ALLEN
Address: 2003 GANDY BLVD, SUITE 800
City-St-Zip: SAINT PETERSBURG, FL 33702

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:

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 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: TODD SIEGEL

PD

05/17/2007

Electronic Signature of Signing Officer or Director

Date