2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000094166

Entity Name: KIBLER MEDICAL, INC.

FILED May 17, 2011 Secretary of State

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Business:	New Principal Place o	f Business:	
US			
	New Mailing Address:		
US			
Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:		Name and Address of New Registered Agent:	
US			
nits this statement for the p	ourpose of changing its registered	office or registered agent, or both,	
gnature of Registered Age	ent	Date	
e.			
	US I Number Applied For () Int Registered Agent: US Inits this statement for the parameters of Registered Agent	New Mailing Address: US I Number Applied For () FEI Number Not Applicable () Int Registered Agent: Name and Address of US Its this statement for the purpose of changing its registered gnature of Registered Agent	

Title: MR

KIBLER, RUSSELL A Name: 4430 KINCARDINE DRIVE Address: City-St-Zip: JACKSONVILLE, FL 32257 US

I hereby 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 all other like empowered.

SIGNATURE: RUSS KIBLER MR 05/17/2011