2005 FOR PROFIT CORPORATION **ANNUAL REPORT**

May 04, 2005 8:00 am Secretary of State **DOCUMENT # P98000076258** 05-04-2005 90121 047 ***150 00 IFARM/EMEDICAL ID, INC. Principal Place of Business Mailing Address PO BOX 91215 3504 CENTURY BLVD. LAKELAND, FL 33804-1215 STE. 4 LAKELAND, FL 33811 2. Principal Place of Business 3. Mailing Address 3504 CENTURY BLYD Suite, Apt. #, etc. Suite, Apt. #, etc. 03112005 Chg-P CR2E034 (10/03) STE 4 City & State Applied For City & State 4. FEI Number LAKELAND 59-3557192 Not Applicable Zip Country Zip \$8.75 Additional 5. Certificate of Status Desired 33811 USA Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent W. LANCE GERLIN Street Address (P.O. Box Number is Not Acceptable) 325 N. CALHOUN ST. TALLAHASSEE FL 32301 Zip Code 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE ______Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE Delete TITLE ☐ Change WILLIAMS, JACQUELYN NAME NAME SEE ATTACHED LIST STREET ADDRESS 426 PALMOLA ROAD STREET ADDRESS LAKELAND, FL 33803 CITY-ST-7IP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition WALTERS, BETTY R NAME 460 WINDERMERE DR. . STREET ADDRESS STREET ADDRESS CITY-ST-ZIP LAKELAND, FL 33809 CITY-ST-ZIP TITLE PCFO ☐ Delete TITLE Change ☐ Addition BROWN, DOUGLAS & NAME NAME 3504 CENTURY BUYD., STE. 4 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP LAKELAND, FL 38811 CITY-ST-ZIP TITLE ☐ Delete ☐ Change ■ Addition SHIVERS, JEFF CPR NAME 3504 CENTURY BLVD. STREET ADDRESS STREET ADDRESS LAKELAND, FL 33811 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition PITTS, DR. A.B. NAME MAME STREET ADDRESS 3504 CENTURY BLVD. STREET ADDRESS CITY-ST-ZIP LAKELAND, FL 33811 CITY-ST-ZIP TITLE Delete Change ☐ Addition LONGBONS, PETER NAME NAME STREET ADDRESS 3604 CENTURY BLVD. STREET ADDRESS CITY-ST-ZIP LAKELAND, FL 33811 CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify 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 signature shall have the same legal effect as it 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

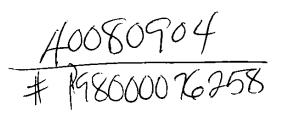
PRINTED NAME OF SIGNING OFFICER OR DIRECTOR PRESIDENT/CEO

SIGNATURE:

FILED

ATTACHMENT

IFARM/Emedical ID, Inc. Board of Directors



Douglas R. Brown President/CEO IFARM/Emedical ID, Inc. 3504 Century Boulevard, #4 Lakeland, Florida 33811-3303	P/D/C
B. Keith Byrd 3502 Springville Drive Valrico, Florida 33594	D
Jeffrey C. Lee, Sr. 18987 Point Drive Jupiter, Florida 33469	D
Dr. Amasa D. (Buddy) Pitts #5 Winding Circle Valdosta, Georgia 31602	D
Jeffrey S. Shivers, C.P.A. Hamic & Shivers, P.A. 4953 Southfork Drive Lakeland, Florida 33813	D
W. Lance Gerlin, Esq. W. Lance Gerlin, PA 325 North Calhoun Street Tallahassee, Florida 32301-7605	S
Betty R. Walters 460 Windermere Drive Lakeland, Florida 33809	Т