## 2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000034097

Entity Name: JAY HOME MEDICAL EQUIPMENT, INC.

**Current Principal Place of Business:** 

6277 POWERS AVE. JACKSONVILLE. FL 32217

**Current Mailing Address:** 

6277 POWERS AVE.

JACKSONVILLE, FL 32217 US

FEI Number: 55-0825243 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BRUNO, MICHAEL W. 6277 POWERS AVE. JACKSONVILLE, FL 32217 US

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

FILED Mar 19, 2020

**Secretary of State** 

2491456181CC

Officer/Director Detail:

Title P Title S,CFO, D

NameSAPP, GREGORYNameBRUNO, MICHAEL W.Address6277 POWERS AVE.Address6277 POWERS AVE.

City-State-Zip: JACKSONVILLE FL 32217 City-State-Zip: JACKSONVILLE FL 32217

Title D

Name SAPP, GREGORY
Address 6277 POWERS AVE

City-State-Zip: JACKSONVILLE FL 32217

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: MICHAEL BRUNO

Electronic Signature of Signing Officer/Director Detail

**CFO** 

03/19/2020