

2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000088719

Entity Name: BARBER MEDICAL, INC.

Current Principal Place of Business:

4018 W CORONA ST
TAMPA, FL 33629

Current Mailing Address:

4018 W CORONA ST
TAMPA, FL 33629 US

FEI Number: 26-3386882

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BARBER, DOUGLAS P
4018 W CORONA ST
TAMPA, FL 33629 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

Officer/Director Detail :

Title P
Name BARBER, DOUGLAS P
Address 4018 W CORONA ST
City-State-Zip: TAMPA FL 33629

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: DOUGLAS P BARBER

PRESIDENT

01/12/2015

_____ Electronic Signature of Signing Officer/Director Detail

_____ Date