

2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P09000082453

Entity Name: APOGEE MEDICAL GROUP, FLORIDA, INC.

Current Principal Place of Business:

15059 N SCOTTSDALE ROAD
SUITE 600
SCOTTSDALE, AZ 85254

Current Mailing Address:

15059 N SCOTTSDALE ROAD
SUITE 600
SCOTTSDALE, AZ 85254 US

FEI Number: 27-1072837

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 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 PRESIDENT, SECRETARY, DIRECTOR
Name GREGORY, MICHAEL W
Address 15059 N SCOTTSDALE ROAD
 SUITE 600
City-State-Zip: SCOTTSDALE AZ 85254

Title AUTHORIZED PERSON
Name HARWELL, KAREN
Address 15059 N SCOTTSDALE ROAD
 SUITE 600
City-State-Zip: SCOTTSDALE AZ 85254

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: KAREN HARWELL

AUTHORIZED PERSON

01/25/2024

Electronic Signature of Signing Officer/Director Detail

Date