

2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P09000092194

Entity Name: OMNICOMM USA, INC.**Current Principal Place of Business:**2101 WEST COMMERCIAL BLVD.
3500
FORT LAUDERDALE, FL 33309**Current Mailing Address:**2101 WEST COMMERCIAL BLVD.
3500
FORT LAUDERDALE, FL 33309**FEI Number: 27-1316408****Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**VICKERS, THOMAS E CHIEF FINANCIAL OFFICER
2101 WEST COMMERCIAL BLVD.
3500
FORT LAUDERDALE, FL 33309 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:** THOMAS E. VICKERS**04/25/2018**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DIRECTOR; CHAIRMAN
Name WIT, CORNELIS F
Address 2101 WEST COMMERCIAL BLVD.
SUITE 3500
City-State-Zip: FORT LAUDERDALE FL 33309

Title DIRECTOR
Name SMITH, RANDALL G
Address 2101 WEST COMMERCIAL BLVD.
SUITE 3500
City-State-Zip: FORT LAUDERDALE FL 33309

Title CFO
Name VICKERS, THOMAS E
Address 2101 WEST COMMERCIAL BLVD.
SUITE 3500
City-State-Zip: FORT LAUDERDALE FL 33309

Title PRESIDENT, CEO
Name JOHNSON, STEPHEN E.
Address 2101 WEST COMMERCIAL BLVD.
3500
City-State-Zip: FORT LAUDERDALE FL 33309

Title DIRECTOR
Name SCHWEITZER, ROBERT C
Address 2101 WEST COMMERCIAL BLVD.
3500
City-State-Zip: FORT LAUDERDALE FL 33309

Title DIRECTOR
Name COHEN, ADAM F
Address 2101 WEST COMMERCIAL BLVD.
3500
City-State-Zip: FORT LAUDERDALE FL 33309

Title DIRECTOR
Name SHANGOLD, GARY A.
Address 2101 WEST COMMERCIAL BLVD.
3500
City-State-Zip: FORT LAUDERDALE FL 33309

Title COO
Name FONTENAULT, JOHN
Address 2101 WEST COMMERCIAL BLVD.
3500
City-State-Zip: FORT LAUDERDALE FL 33309

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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: THOMAS E. VICKERS**CFO****04/25/2018**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title CCO
Name VAN DER POST, KUNO
Address 2101 WEST COMMERCIAL BLVD.
3500
City-State-Zip: FORT LAUDERDALE FL 33309

Title CTO
Name HOWELLS, KEITH
Address 2101 WEST COMMERCIAL BLVD.
3500
City-State-Zip: FORT LAUDERDALE FL 33309