

**2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P11000066977

**Entity Name:** MOORE MEDICAL GROUP, INC.

**Current Principal Place of Business:**

424 TIMBERWALK LANE  
LAKE MARY, FL 32746

**Current Mailing Address:**

PO BOX 953935  
LAKE MARY, FL 32795 US

**FEI Number:** 20-4389641

**Certificate of Status Desired:** Yes

**Name and Address of Current Registered Agent:**

MOORE, ERIC  
424 TIMBERWALK LANE  
LAKE MARY, FL 32746 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 D  
Name MOORE, ERIC  
Address 424 TIMBERWALK LANE  
City-State-Zip: LAKE MARY FL 32746

*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:** ERIC A. MOORE

CEO

04/11/2019

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date