

**2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P12000001896

**Entity Name:** NEPHRON IC/DISC, INC.

**Current Principal Place of Business:**

4121 SW 34TH STREET  
ORLANDO, FL 32811

**Current Mailing Address:**

4121 SW 34TH STREET  
ORLANDO, FL 32811

**FEI Number:** 61-1673464

**Certificate of Status Desired:** No

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

LEE, BARBARA J  
4121 SW 34TH STREET  
ORLANDO, FL 32817 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 PD  
Name KENNEDY, LOU W  
Address 4121 SW 34TH STREET  
City-State-Zip: ORLANDO FL 32811

Title SDC  
Name LEE, BARBARA J  
Address 4121 SW 34TH STREET  
City-State-Zip: ORLANDO FL 32811

Title TD  
Name BORSOI, ALEXANDER  
Address 4121 SW 34TH STREET  
City-State-Zip: ORLANDO FL 32811

Title D  
Name MCGOWAN, MICHAEL  
Address 4121 SW 34TH STREET  
City-State-Zip: ORLANDO FL 32811

*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:** BARBARA J LEE

**SECRETARY**

**04/28/2015**

Electronic Signature of Signing Officer/Director Detail

Date