

2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P13000021340

Entity Name: TRITON MEDICAL SYSTEMS, INC

Current Principal Place of Business:

309 BONITA ROAD WOODBOUND
DEBARY, FL 32713

Current Mailing Address:

309 BONITA ROAD WOODBOUND
DEBARY, FL 32713 US

FEI Number: 46-2196220

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MORRISON, CHRISTOPHER HESQ
401 W FAIRBANKS AVE
WINTER PARK, FL 32789 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 COCHRAN, JOHN C
Address 10 MADERA RD
City-State-Zip: DEBARY FL 32713

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: JOHN CHRISTOPHER COCHRAN

PRESIDENT / CEO

04/28/2014

Electronic Signature of Signing Officer/Director Detail

Date