# 2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P15000019433

Entity Name: FLORIDA HOME MEDICAL SUPPLY, INC.

#### **Current Principal Place of Business:**

614 E. ALTAMONTE DRIVE ALTAMONTE SPRINGS. FL 32701

### **Current Mailing Address:**

614 E. ALTAMONTE DRIVE ALTAMONTE SPRINGS. FL 32701

# FEI Number: 59-2196558

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

BRUINSMA, BETTY 614 E. ALTAMONTE DRIVE ALTAMONTE SPRINGS, FL 32701 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

#### **Officer/Director Detail :**

Title	Р	Title	CEO
Name	BRUINSMA, BETTY	Name	BRUINSMA, DAVID
Address	614 E. ALTAMONTE DRIVE	Address	614 E. ALTAMONTE DRIVE
City-State-Zip:	ALTAMONTE SPRINGS FL 32701	City-State-Zip:	ALTAMONTE SPRINGS FL 32701

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.

CEO

# SIGNATURE: DAVID BRUINSMA

Electronic Signature of Signing Officer/Director Detail

FILED Apr 19, 2019 Secretary of State 8787124668CC

Date

Certificate of Status Desired: No

04/19/2019

Date