

**2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P18000067451

**Entity Name:** AMERICAN MEDICAL DISCOUNT SUPPLIES, INC.

**Current Principal Place of Business:**

245 S COUNTRY CLUB BLVD  
BOCA RATON, FL 33487

**Current Mailing Address:**

PO BOX 294009  
BOCA RATON, FL 33429-4009 US

**FEI Number:** 37-1906326

**Certificate of Status Desired:** No

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

DICKSON, JAMES  
245 S COUNTRY CLUB BLVD  
BOCA RATON, FL 33487 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:** JAMES DICKSON

01/22/2024

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title P, S  
Name DICKSON, JAMES  
Address PO BOX 294009  
City-State-Zip: BOCA RATON FL 33429-4009

Title VP  
Name DICKSON, CHRISTINA  
Address PO BOX 294009  
City-State-Zip: BOCA RATON FL 33429-4009

*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:** JAMES P DICKSON

**PRESIDENT**

01/22/2024

Electronic Signature of Signing Officer/Director Detail

Date