

**2021 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P19000041838

**Entity Name:** MEDFINITI, INC**Current Principal Place of Business:**119 N. 11TH STREET  
SUITE 300A  
TAMPA, FL 33602**Current Mailing Address:**119 N. 11TH STREET  
SUITE 300A  
TAMPA, FL 33602 US**FEI Number:** 84-1897652**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**GOEREE, MICHAEL J  
119 N. 11TH STREET  
SUITE 300A  
TAMPA, FL 33602 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 CHAIRMAN, PRESIDENT, CEO  
Name GOEREE, MICHAEL J  
Address 119 N. 11TH STREET  
SUITE 300A  
City-State-Zip: TAMPA FL 33602Title EVP, COO, DIRECTOR  
Name LEWIS, CEDRIC E  
Address 119 N. 11TH STREET  
SUITE 300A  
City-State-Zip: TAMPA FL 33602Title EVP, CFO  
Name KNOX, MICHAEL A  
Address 119 N. 11TH STREET  
SUITE 300A  
City-State-Zip: TAMPA FL 33602Title DIRECTOR  
Name GOLDMAN, STEPHEN A DR.  
Address 119 N. 11TH STREET  
SUITE 300A  
City-State-Zip: TAMPA FL 33602Title DIRECTOR  
Name NGUYEN, LINH B DR.  
Address 119 N. 11TH STREET  
SUITE 300A  
City-State-Zip: TAMPA FL 33602

*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:** MICHAEL J GOEREE**PRESIDENT****03/18/2021**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date