

**2021 FLORIDA PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P20000029731

**Entity Name:** ACTION MEDICAL STAFFING INC.

**Current Principal Place of Business:**

500S FLORIDA AVENUE  
SUITE 402  
LAKELAND, FL 33801

**Current Mailing Address:**

500 S FLORIDA AVENUE  
SUITE 402  
LAKELAND, FL 33801 US

**FEI Number:** 85-0758936

**Certificate of Status Desired:** No

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

CARLA, LOWDELL  
500 S FLORIDA AVENUE  
SUITE 402  
LAKELAND, FL 33801 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:** CARLA LOWDELL

06/18/2021

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT AND CEO  
Name            CARLA, LOWDELL  
Address        340 JAMES K TAYLOR LANE  
City-State-Zip: MERIDIANVILLE AL 35759

Title            VP  
Name            LOWDELL, JAMES  
Address        340 JAMES K TAYLOR LANE  
City-State-Zip: MERIDIANVILLE AL 35759

Title            SECRETARY  
Name            CONNER, JENNIFER  
Address        338 ORVIL SMITH ROAD  
City-State-Zip: HARVEST AL 35749

*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:** CARLA LOWDELL

**PRESIDENT CEO**

06/18/2021

Electronic Signature of Signing Officer/Director Detail

Date