

2022 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P20000085527

Entity Name: VAXCARE LEGACY HOLDINGS, INC.

Current Principal Place of Business:

3113 LAWTON ROAD, SUITE 250
ORLANDO, FL 32803

Current Mailing Address:

3113 LAWTON ROAD, SUITE 250
ORLANDO, FL 32803

FEI Number: 85-3751637

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

YOUR CAPITAL CONNECTION, INC.
417 E. VIRGINIA ST., SUITE 1
TALLAHASSEE, FL 32301 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 D
Name MAZZOLI, JON
Address 3113 LAWTON ROAD, SUITE 250
City-State-Zip: ORLANDO FL 32803

Title D
Name CRABTREE, JOHN
Address 3113 LAWTON ROAD, SUITE 250
City-State-Zip: ORLANDO FL 32803

Title D
Name DELOACH, CASEY B
Address 3113 LAWTON ROAD, SUITE 250
City-State-Zip: ORLANDO FL 32803

Title D
Name DELOACH, DAVID B
Address 3113 LAWTON ROAD, SUITE 250
City-State-Zip: ORLANDO FL 32803

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: CASEY B DELOACH

DIRECTOR

03/17/2022

Electronic Signature of Signing Officer/Director Detail

Date