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: JENNIFER L BAKER

Electronic Signature of Signing Officer/Director Detail

OWNER

## **Current Mailing Address:**

8001 N DALE MABRY HWY 101 TAMPA, FL 33614 US

## FEI Number: 59-3471150

### Name and Address of Current Registered Agent:

BAKER, JENNIFER L 8001 N DALE MABRY HWY 101 TAMPA, FL 33614 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	JENNIFER L BAKER			02/05/2021	
	Electronic Signature of Registered Agent			Date	
Officer/Director Detail :					
Title	OWNER	Title	OWNER		
Name	BAKER, JENNIFER L	Name	BAKER, JENNIFER L		
Address	8001 N DALE MABRY HWY 101	Address	8001 N DALE MABRY HWY 101		
City-State-Zip:	TAMPA FL 33614	City-State-Zip:	TAMPA FL 33614		

Certificate of Status Desired: No

FILED Feb 05, 2021 Secretary of State 3360093821CC

## 2021 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000088312

Entity Name: COPELAND PROSTHETICS & RESEARCH, INC.

# **Current Principal Place of Business:**

8001 N DALE MABRY HWY 101 TAMPA, FL 33614

02/05/2021 Date