

2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000064372

Entity Name: LIBERATOR MEDICAL SUPPLY, INC.

Current Principal Place of Business:

2927 SE GRAN PARK WAY
STUART, FL 34997

Current Mailing Address:

2927 SE GRAN PARK WAY
STUART, FL 34997 US

FEI Number: 65-0936904

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
BROWARD COUNTY, FL 33324 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: C T CORPORATION SYSTEM

04/04/2018

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title VP, DIRECTOR
Name MEE, DOUG
Address 2927 SE GRAN PARK WAY
City-State-Zip: STUART FL 34997

Title DIRECTOR
Name CHATEL, PAUL
Address 2927 SE GRAN PARK WAY
City-State-Zip: STUART FL 34997

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: DOUG MEE

VICE PRESIDENT

04/04/2018

Electronic Signature of Signing Officer/Director Detail

Date