

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L12000124006

**Entity Name:** HEPCO MEDICAL LLC

**Current Principal Place of Business:**

200 CENTRAL AVE.  
SUITE 2200  
ST PETERSBURG, FL 33701

**Current Mailing Address:**

200 CENTRAL AVE.  
SUITE 2200  
ST PETERSBURG, FL 33701 US

**FEI Number:** 46-2152724

**Certificate of Status Desired:** No

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

WAECHTER, JOHN  
721 1ST AVE N  
ST. PETERSBURG, FL 33701 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:** JOHN WAECHTER

04/19/2021

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title AUTHORIZED MEMBER  
Name HEPCO HOLDINGS, LLC  
Address C/O CORPORATON TRUST COMPANY  
1209 ORANGE STREET  
City-State-Zip: WILMINGTON DE 19801

*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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** AMANDA EVANS

SENIOR ACCOUNTANT

04/19/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date