

2024 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M20000008174

Entity Name: ANCHORAGE MEDICAL EQUIPMENT & SUPPLIES, LLC

Current Principal Place of Business:

P O BOX 543472

GRAND PRAIRIE, TX 75054

Current Mailing Address:

P O BOX 543472

GRAND PRAIRIE, TX 75054 US

FEI Number: 81-3149693

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

REGISTERED AGENTS INC

7901 4TH ST N STE 300

ST PETERSBURG, FL 33702 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

Authorized Person(s) Detail :

Title MGRM, AP

Name GRIFFIN, DANA

Address P O BOX 531966

City-State-Zip: GRAND PRAIRIE TX 75053

Title MAP

Name MARTIN, SHANNON

Address 900 N WALNUT CREEK DR #100256

City-State-Zip: MANSFIELD TX 76063

Title MAP

Name GARIBALDI, LOIS

Address P O BOX 531966

City-State-Zip: GRAND PRAIRIE TX 75053

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: DANA GRIFFIN

03/27/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date