

**2019 FOREIGN PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# F07000001436

**Entity Name:** TACTILE SYSTEMS TECHNOLOGY, INC.**Current Principal Place of Business:**1331 TYLER ST. NE  
SUITE 200  
MINNEAPOLIS, MN 55413**Current Mailing Address:**1331 TYLER ST. NE  
SUITE 200  
MINNEAPOLIS, MN 55413**FEI Number:** 41-1801204**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301-2525 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 COO  
Name FOLKES, ROBERT  
Address 1331 TYLER ST NE, SUITE 200  
City-State-Zip: MINNEAPOLIS MN 55413

Title DIRECTOR  
Name ROCHE, KEVIN  
Address 6800 DAKOTA TRAIL  
City-State-Zip: EDINA MN 55439

Title CEO  
Name MATTYS, GERALD  
Address 1331 TYLER ST NE, SUITE 200  
City-State-Zip: MINNEAPOLIS MN 55413

Title CHAIRMAN  
Name SODERBERG, PETER H  
Address 255 WHISKEY ROW  
PO BOX 1023  
City-State-Zip: BOCA GRANDE FL 33921

Title DIRECTOR  
Name NIGON, RICHARD J  
Address 445 SPRING HILL ROAD  
City-State-Zip: WAYZATA MN 55391

Title SVP SALES  
Name RISHE, BRYAN  
Address 1331 TYLER ST. NE  
SUITE 200  
City-State-Zip: MINNEAPOLIS MN 55413

Title VP, REIMBURSEMENT AND PAYER  
RELATIONS  
Name STRACKE, ROWDY JAY  
Address 1331 TYLER ST. NE  
SUITE 200  
City-State-Zip: MINNEAPOLIS MN 55413

Title CFO  
Name MOEN, BRENT  
Address 1331 TYLER ST. NE  
SUITE 200  
City-State-Zip: MINNEAPOLIS MN 55413

**Continues on page 2**

*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:** BRENT MOEN

CFO

08/05/2019

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title DIRECTOR  
Name BURKE, WILLIAM WALKER  
Address 2514 TANGLEWOOD TRAIL  
City-State-Zip: AUSTIN TX 78703

Title DIRECTOR  
Name HUGGENBERGER, RAYMOND O  
Address 3378 ADAMS RUN  
City-State-Zip: ENCINITAS CA 92024

Title DIRECTOR  
Name PEGUS, CHERYL  
Address 1121 BETHLEHEM PIKE 60-284  
City-State-Zip: SPRING HOUSE PA 19477

Title VP COMPLIANCE OFFICER  
Name HOY, SUNDAY  
Address 1331 TYLER STREET NE, STE 200  
City-State-Zip: MINNEAPOLIS MN 55413