

2024 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F09000002540

Entity Name: KELLER MEDICAL, INC.

Current Principal Place of Business:

1 N WAUKEGAN ROAD
NORTH CHICAGO, IL 60064

Current Mailing Address:

1 N WAUKEGAN ROAD
TAX DEPARTMENT AP34-3
NORTH CHICAGO, IL 60064 US

FEI Number: 26-2093764

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATE CREATIONS NETWORK INC,
801 US HIGHWAY 1
NORTH PALM BEACH, FL 33408 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: MITCHELL GARONCE, VICE PRESIDENT

04/04/2024

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT, DIRECTOR
Name REENTS, SCOTT T
Address 1 N WAUKEGAN ROAD
City-State-Zip: NORTH CHICAGO IL 60064

Title D, VP
Name BRISTOW, LINDSEY M.
Address 1 N WAUKEGAN ROAD
City-State-Zip: NORTH CHICAGO IL 60064

Title TREASURER
Name PURDUE, DAVID R
Address 1 N WAUKEGAN ROAD
City-State-Zip: NORTH CHICAGO IL 60064

Title ASST. SECRETARY
Name CORBIN, JOHANNA M
Address 1 N WAUKEGAN ROAD
City-State-Zip: NORTH CHICAGO IL 60064

Title ASST. TREASURER
Name KLINTWORTH, WAYNE
Address 1 N WAUKEGAN ROAD
City-State-Zip: NORTH CHICAGO IL 60064

Title ASST. SECRETARY
Name WEITH, EMILY
Address 1 N WAUKEGAN ROAD
City-State-Zip: NORTH CHICAGO IL 60064

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: CORBIN , JOHANNA M

ASST. SECRETARY, BY
JACK HIGGINS,
ATTORNEY-IN-FACT

04/04/2024

Electronic Signature of Signing Officer/Director Detail

Date