## **2019 FOREIGN PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# F10000003814

**Entity Name: REALMED/AV CORPORATION** 

**Current Principal Place of Business:** 

5555 GATE PKWY, STE 110 JACKSONVILLE, FL 32256-3043

**Current Mailing Address:** 

5555 GATE PKWY, STE110 JACKSONVILLE. FL 32256-3043 US

FEI Number: 35-1970389 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, 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: KIMBERLY LAUGHREY, ASST. SECT. 10/09/2019

Electronic Signature of Registered Agent

Officer/Director Detail:

Title CEO Title CORPORATE SECRETARY THOMAS, RUSSEL S ANDERSON, CATHERINE HORA Name Name 5555 GATE PKWY, STE 110 Address 5555 GATE PKWY, STE 110 Address City-State-Zip: JACKSONVILLE FL 32256-3043 JACKSONVILLE FL 32256-3043 City-State-Zip:

Title CFO/SECRETARY
Name EASTMAN, NATE

Address 5555 GATE PKWY, STE 110
City-State-Zip: JACKSONVILLE FL 32256-3043

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: CATHERINE HORA ANDERSON

CORPORATE SECRETAR 10/09/2019

Date

FILED Oct 09, 2019

**Secretary of State** 

7038678012CR

Date