2018 FOREIGN PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 12, 2018
Secretary of State
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Entity Name: CHARTSPAN MEDICAL TECHNOLOGIES, INC.

Current Principal Place of Business:

2 N MAIN ST
GREENVILLE, SC 29601

Current Mailing Address:

2 N MAIN ST
GREENVILLE, SC 29601 US

FEI Number: 46-1350379

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CAPITOL CORPORATE SERVICES, INC.
515 EAST PARK AVENUE
2ND FL
TALLAHASSEE, FL 32301 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	CEOC
Name	CARTER, JON-MICHIAL
Address	2 N MAIN ST
City-State-Zip:	GREENVILLE SC 29601

Title	CMO
Name	CARTER, JAMES PATRICK
Address	2 N MAIN ST
City-State-Zip:	GREENVILLE SC 29601

Title	SGC
Name	HAMMOND, JONATHAN
Address	2 N MAIN ST
City-State-Zip:	GREENVILLE SC 29601

Title	D
Name	BYRNE, DON
Address	2 N MAIN ST
City-State-Zip:	GREENVILLE SC 29601

Title	D
Name	BARTH, PETER
Address	101 N MAIN ST, STE 400
City-State-Zip:	GREENVILLE SC 29601

Title	D
Name	CEARLEY, TRACEY
Address	10711 SPUR 231
City-State-Zip:	BRYAN TX 77806

Title	D
Name	BRYAN, SEAN DR
Address	877 W FARIS RD
City-State-Zip:	GREENVILLE SC 29605

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: JONATHAN HAMMOND SECRETARY 03/12/2018

Electronic Signature of Signing Officer/Director Detail — Date