

2019 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F97000001182

Entity Name: AMERICAN HOMEPATIENT VENTURES, INC.

Current Principal Place of Business:

19387 US 19 NORTH
CLEARWATER, FL 33764

Current Mailing Address:

19387 US 19 NORTH ATTN: TAX DEPT
CLEARWATER, FL 33764 US

FEI Number: 62-1505940

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

NRAI SERVICES, INC
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: _____

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT, CEO, DIRECTOR
Name TEUFEL, CRISPIN
Address 19387 U.S. HIGHWAY 19 NORTH
City-State-Zip: CLEARWATER FL 33764

Title CFO, SECRETARY, TREASURER,
DIRECTOR
Name TEUFEL, CRISPIN
Address 19387 U.S. HIGHWAY 19 NORTH
City-State-Zip: CLEARWATER FL 33764

Title COO, DIRECTOR, VP
Name MCCARTHY, GREG G.
Address 19387 U.S. HIGHWAY 19 NORTH
City-State-Zip: CLEARWATER FL 33764

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: CRISPIN TEUFEL

PRESIDENT

03/22/2019

Electronic Signature of Signing Officer/Director Detail

Date