2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N16538

Entity Name: AVMED, INC.

FILED Apr 08, 2023 **Secretary of State** 9647268552CC

Current Principal Place of Business:

6015 POPLAR HALL DRIVE

SUITE 308

NORFOLK, VA 23502

Current Mailing Address:

6015 POPLAR HALL DRIVE **SUITE 308**

NORFOLK, VA 23502 US

FEI Number: 59-2742907 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CT 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:

City-State-Zip:

Address

Address

Electronic Signature of Registered Agent

Date

NORFOLK VA 23502

Officer/Director Detail:

Title **DIRECTOR** Title DIRECTOR

COBLE, , FREDERICK "ERIC" C. Name Name FORT,,, ROBERT C

Address 6015 POPLAR HALL DRIVE Address 6015 POPLAR HALL DRIVE

SUITE 308 SUITE 308

NORFOLK VA 23502 NORFOLK VA 23502 City-State-Zip: City-State-Zip:

Title **DIRECTOR** Title **DIRECTOR**

HALL, , J. LES HUBBARD, , MD WILKES Name Name

6015 POPLAR HALL DRIVE 6015 POPLAR HALL DRIVE Address Address

SUITE 308 SUITE 308

Title **DIRECTOR** Title DIRECTOR

MATHEIS, , DENNIS A. SMITH, , EDD JEFFERY O. Name Name

6015 POPLAR HALL DRIVE 6015 POPLAR HALL DRIVE Address SUITE 308

City-State-Zip:

SUITE 308

NORFOLK VA 23502 NORFOLK VA 23502 City-State-Zip: City-State-Zip:

Title **DIRECTOR**

VICK, . , CATHIE J Name

> 6015 POPLAR HALL DRIVE SUITE 308

NORFOLK VA 23502

City-State-Zip: NORFOLK VA 23502

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

04/08/2023 SIGNATURE: MATHEIS, DENNIS A. DIRECTOR