

2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 520704

Entity Name: WILLIAMS ORTHOTIC-PROSTHETIC, INC.

Current Principal Place of Business:

2360 CENTERVILLE RD.
TALLAHASSEE, FL 32308

Current Mailing Address:

2360 CENTERVILLE RD.
TALLAHASSEE, FL 32308

FEI Number: 59-1710015

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

WILLIAMS, RICHARD C., JR.
2360 CENTERVILLE ROAD
TALLAHASSEE, FL 32308 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 P
Name WILLIAMS, RICHARD C.JR.
Address 9042 OLD CHEMONIE ROAD
City-State-Zip: TALLAHASSEE FL 32309

Title ST
Name WILLIAMS, JOANNE O.
Address 333 RUGER CT
City-State-Zip: TALLAHASSEE FL 32309

Title VP
Name WILLIAMS, CATHERINE N
Address 9042 OLD CHEMONIE ROAD
City-State-Zip: TALLAHASSEE FL 32308

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: RICHARD C. WILLIAMS, JR.

PRESIDENT

02/21/2017

Electronic Signature of Signing Officer/Director Detail

Date