

2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F20930

Entity Name: MAHNKE'S ORTHOTICS & PROSTHETICS OF DEERFIELD, INC.

FILED
Mar 09, 2016
Secretary of State
CC7605834704

Current Principal Place of Business:

4050 NE 5TH AVE.
A
OAKLAND PARK, FL 33334

Current Mailing Address:

4050 NE 5TH AVE.
A
OAKLAND PARK, FL 33334

FEI Number: 59-2066233

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

NEWBERRY, JAMES G.
4050 NE 5TH AVE, STE A
OAKLAND PARK, FL 33334 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
Name NEWBERRY, JAMES GEORGE JR.
Address 402 NE 6 AVENUE
City-State-Zip: DEERFIELD BEACH FL 33341

Title VP
Name NEWBERRY, LYNNENE DIANE
Address 402 NE 6 AVENUE
City-State-Zip: DEERFIELD BEACH FL 33441

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: JAMES GEORGE NEWBERRY JR

PRESIDENT

03/09/2016

Electronic Signature of Signing Officer/Director Detail

Date