3903 NOF TAMPA, 1	RTH FLORIDA AVENUE FL 33603		
FEI Numb	per: 75-3039214		Certificate of Status Desired:
Name and Address of Current Registered Agent:			
TAMPA, FL	OREGON AVE 33606 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		
Officer/Di	rector Detail :		
Title	D	Title	D
Name	MUSSELMAN, D. R II	Name	MUSSELMAN, CAROLYN
Address	13358 GOLF CREST CIRCLE	Address	13358 GOLF CREST CIRCLE

## 2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT

# DOCUMENT# P02000035784

Entity Name: IDEACOM HEALTHCARE COMMUNICATIONS OF FLORIDA, INC.

### **Current Principal Place of Business:**

3903 NORTH FLORIDA AVENUE TAMPA, FL 33603

#### **Current Mailing Address:**

City-State-Zip: TAMPA FL 33618

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: D.R. MUSSELMAN II

DIRECTOR

04/08/2024

Electronic Signature of Signing Officer/Director Detail

FILED Apr 08, 2024 Secretary of State 7208833109CC

Date

red: No

13358 GOLF CREST CIRCLE City-State-Zip: TAMPA FL 33618

Date