## 2021 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P14000022784

Entity Name: ZYVERSA THERAPEUTICS, INC.

**Current Principal Place of Business:** 

2200 N. COMMERCE PARKWAY

SUITE 208

WESTON, FL 33326

**Current Mailing Address:** 

2200 N. COMMERCE PARKWAY

SUITE 208

WESTON, FL 33326 US

FEI Number: 46-5188564 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

WHITLOCK, TED 2200 N COMMERCE PARKWAY SUITE 208

WESTON, FL 33326 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: TED WHITLOCK 04/02/2021

Electronic Signature of Registered Agent Date

Officer/Director Detail:

City-State-Zip:

Title D,CEO Title D

Name GLOVER, STEPHEN C Name MUSING, JULES A

Address 2200 N. COMMERCE PARKWAY Address 2200 N COMMERCE PARKWAY SUITE

SUITE 208

WESTON FL 33326 City-State-Zip: WESTON FL 33326

Title D Title D

Name FINIZIO, ROBERT G Name GIOVINAZZO, ANTHONY J

Address 2200 N COMMERCE PARKWAY SUITE Address 2200 N COMMERCE PARKWAY SUITE

City-State-Zip: WESTON FL 33326 City-State-Zip: WESTON FL 33326

Title D Title D

Name GREENBLATT, AARON Name RICHMAN, ERIC

Address 2200 N COMMERCE PARKWAY SUITE Address 2200 N COMMERCE PARKWAY SUITE

City-State-Zip: WESTON FL 33326 City-State-Zip: WESTON FL 33326

Title D

Name KIM. ANDREW

Address 2200 N. COMMERCE PARKWAY SUITE

208

City-State-Zip: WESTON FL 33326

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: STEPHEN C. GLOVER CEO 04/02/2021

FILED Apr 02, 2021

**Secretary of State** 

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