

**2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P15000014734

**Entity Name:** SIMCO HEALTHCARE INC.

**Current Principal Place of Business:**

4408 CHASTAIN DR.  
MELBOURNE, FL 32940

**Current Mailing Address:**

4408 CHASTAIN DR.  
MELBOURNE, FL 32940

**FEI Number:** 47-3178077

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

GRAHAM, CANDY EA  
7610 EMERALD DRIVE  
W.MELBOURNE, FL 32904 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            D  
Name            REDDISH, SHARON  
Address        4408 CHASTAIN DR.  
City-State-Zip: MELBOURNE FL 32940

*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:** SHARON REDDISH

MRS

01/10/2017

\_\_\_\_\_ Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_ Date