

2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P16000058423

Entity Name: TEAM HARRINGTON MEDICAL, INC.**Current Principal Place of Business:**9021 NW 24 COURT
SUNRISE, FL 33322**Current Mailing Address:**9021 NW 24 COURT
SUNRISE, FL 33322 US**FEI Number:** 81-3265042**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**HARRINGTON II, CHARLES
9021 NW 24 COURT
SUNRISE, FL 33322 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:** CHARLES HARRINGTON II

01/31/2023

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	P
Name	HARRINGTON II, CHARLES RUSSELL
Address	9021 NW 24 COURT
City-State-Zip:	SUNRISE FL 33322

Title	VP
Name	HARRINGTON, JESSICA TERESA
Address	9021 NW 24 COURT
City-State-Zip:	SUNRISE FL 33322

Title	TREASURER
Name	HARRINGTON, ELIOT NORAH
Address	9021 NW 24 COURT
City-State-Zip:	SUNRISE FL 33322

Title	SECRETARY
Name	HARRINGTON, COLBY ANTHONY
Address	9021 NW 24 COURT
City-State-Zip:	SUNRISE FL 33322

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: CHARLES HARRINGTON II

PRESIDENT

01/31/2023

Electronic Signature of Signing Officer/Director Detail

Date