

2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000086284

Entity Name: CAPITAL MEDICAL CORPORATION

Current Principal Place of Business:

1324 THOMASWOOD DRIVE
TALLAHASSEE, FL 32308

Current Mailing Address:

PO BOX 15013
TALLAHASSEE, FL 32317 US

FEI Number: 59-3279715

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

WOOD, JOHN H
1324 THOMASWOOD DRIVE
TALLAHASSEE, FL 32308 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 PD
Name WOOD, JOHN H
Address 545 FRANK SHAW ROAD
City-State-Zip: TALLAHASSEE FL 32312

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: JOHN H. WOOD

PRESIDENT

04/04/2017

Electronic Signature of Signing Officer/Director Detail

Date