2024 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F07000002592

Entity Name: ACCELERATED CARE PLUS CORP.

Current Principal Place of Business:

10910 DOMAIN DRIVE SUITE 300

AUSTIN, TX 78758

Current Mailing Address:

10910 DOMAIN DRIVE SUITE 300

AUSTIN, TX 78758 US

FEI Number: 36-4331609 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525 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:

City-State-Zip:

City-State-Zip:

Electronic Signature of Registered Agent

Date

FILED Apr 20, 2024

Secretary of State

4918382046CC

Officer/Director Detail:

PRESIDENT Title Title DIRECTOR, EXECUTIVE VP, ASST.

SECRETARY, ASST. TREASURER

LEGRAND, SPENCER DIXON Name Name KIRALY, THOMAS E. Address

10910 DOMAIN DRIVE Address 10910 DOMAIN DRIVE

SUITE 300 SUITE 300

AUSTIN TX 78758 AUSTIN TX 78758 City-State-Zip:

Title SECRETARY, GENERAL COUNSEL,

Title ASST. SECRETARY, VP OF TAX SENIOR VP

HARTMAN, THOMAS E. Name ROWE, SCOTT Name

10910 DOMAIN DRIVE Address 10910 DOMAIN DRIVE Address

SUITE 300 SUITE 300

AUSTIN TX 78758 AUSTIN TX 78758 City-State-Zip:

Title **TREASURER** Title CEO, DIRECTOR TALLEY, JOSEPH C. STOY, PETER A. Name Name

10910 DOMAIN DRIVE 10910 DOMAIN DRIVE Address Address

> SUITE 300 SUITE 300

City-State-Zip: AUSTIN TX 78758 City-State-Zip: AUSTIN TX 78758

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.

04/20/2024 SIGNATURE: SCOTT ROWE ASSISTANT SECRETARY