## 2019 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F11000004831

Entity Name: APTUS HEALTH, INC.

**Current Principal Place of Business:** 

55 WALKERS BROOK DRIVE

SUITE 500

READING, MA 01867

**Current Mailing Address:** 

55 WALKERS BROOK DRIVE

SUITE 500

READING, MA 01867 US

FEI Number: 02-0469830 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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:

Address

Electronic Signature of Registered Agent

Date

**FILED** Feb 22, 2019

**Secretary of State** 

5780522831CC

Officer/Director Detail:

**DIRECTOR** Title Title **TREASURER** 

SENOUR, LAWRENCE D. BRIDGE, JOHN L. Name Name

> 55 WALKERS BROOK DRIVE Address 55 WALKERS BROOK DRIVE SUITE 500

SUITE 500

**READING MA 01867 READING MA 01867** City-State-Zip: City-State-Zip:

Title **SECRETARY** Title DIRECTOR/PRESIDENT JACOBSON, JAMES THOMPSON, TIMOTHY Name Name

55 WALKERS BROOK DRIVE 55 WALKERS BROOK DRIVE Address Address

> SUITE 500 SUITE 500

READING MA 01867 **READING MA 01867** City-State-Zip: City-State-Zip:

Title **DIRECTOR** EIFERMAN, GUY Name

55 WALKERS BROOK DRIVE Address

SUITE 500

READING MA 01867 City-State-Zip:

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: JAMES JACOBSON

**SECRETARY** 

02/22/2019