

2013 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F99000001297

Entity Name: OMNICOMM SYSTEMS, INC.

Current Principal Place of Business:

2101 WEST COMMERCIAL BLVD
SUITE 3500
FORT LAUDERDALE, FL 33309

Current Mailing Address:

2101 WEST COMMERCIAL BLVD
SUITE 3500
FORT LAUDERDALE, FL 33309

FEI Number: 11-3349762

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

VICKERS, THOMAS E
2101 WEST COMMERCIAL BLVD.
SUITE 3500
FORT LAUDERDALE, FL 33309 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: THOMAS E VICKERS

04/16/2013

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title OFFICER, SECRETARY, CHAIRMAN
Name SMITH, RANDALL G
Address 2101 WEST COMMERCIAL BLVD.
SUITE 3500
City-State-Zip: FORT LAUDERDALE FL 33309

Title DIRECTOR
Name VAN KESTEREN, GUUS
Address 2101 WEST COMMERCIAL BLVD.
SUITE 3500
City-State-Zip: FORT LAUDERDALE FL 33309

Title CEO, DIRECTOR
Name WIT, CEES
Address 2101 WEST COMMERCIAL BLVD.
SUITE 3500
City-State-Zip: FORT LAUDERDALE FL 33309

Title CFO
Name VICKERS, THOMAS E
Address 2101 WEST COMMERCIAL BLVD.
SUITE 3500
City-State-Zip: FORT LAUDERDALE FL 33309

Title COO, PRESIDENT
Name JOHNSON, STEPHEN E
Address 2101 WEST COMMERCIAL BLVD.
SUITE 3500
City-State-Zip: FORT LAUDERDALE FL 33309

Title DIRECTOR
Name SELTZER, JONATHAN
Address 2101 WEST COMMERCIAL BLVD.
SUITE 3500
City-State-Zip: FORT LAUDERDALE FL 33309

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: THOMAS E VICKERS

CHIEF FINANCIAL OFFICER

04/16/2013

Electronic Signature of Signing Officer/Director Detail

Date