

**2018 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F99000001297

**Entity Name:** OMNICOMM SYSTEMS, INC.

**FILED**  
**Apr 25, 2018**  
**Secretary of State**  
**CC5993976467**

**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**

**04/25/2018**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

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

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

Title EXECUTIVE CHAIRMAN  
Name WIT, CORNELIS F  
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 CEO, PRESIDENT  
Name JOHNSON, STEPHEN E  
Address 2101 WEST COMMERCIAL BLVD.  
SUITE 3500  
City-State-Zip: FORT LAUDERDALE FL 33309

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

Title DIRECTOR  
Name SCHWEITZER, ROBERT C  
Address 2101 WEST COMMERCIAL BLVD  
SUITE 3500  
City-State-Zip: FORT LAUDERDALE FL 33309

Title CCO  
Name VAN DER POST, KUNO  
Address 2101 WEST COMMERCIAL BLVD.  
3500  
City-State-Zip: FORT LAUDERDALE FL 33309

**Continues on page 2**

*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**

**CFO**

**04/25/2018**

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title COO  
Name FONTENAULT, JOHN  
Address 2101 WEST COMMERCIAL BLVD.  
3500  
City-State-Zip: FORT LAUDERDALE FL 33309

Title CTO  
Name HOWELLS, KEITH  
Address 2101 WEST COMMERCIAL BLVD.  
3500  
City-State-Zip: FORT LAUDERDALE FL 33309