

2024 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00214

Entity Name: SOUTHERN PROSTHETIC SUPPLY, INC.**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:** 58-0276760**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 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 TREASURER
Name TALLEY, JOSEPH C.
Address 10910 DOMAIN DRIVE
 SUITE 300
City-State-Zip: AUSTIN TX 78758

Title PRESIDENT
Name STOY, PETER A.
Address 10910 DOMAIN DRIVE
 SUITE 300
City-State-Zip: AUSTIN TX 78758

Title ASST. SECRETARY, VP OF TAX
Name ROWE, SCOTT
Address 10910 DOMAIN DRIVE
 SUITE 300
City-State-Zip: AUSTIN TX 78758

Title SECRETARY
Name HARTMAN, THOMAS E
Address 10910 DOMAIN DRIVE
 SUITE 300
City-State-Zip: AUSTIN TX 78758

Title DIRECTOR
Name KIRALY, THOMAS E
Address 10910 DOMAIN DRIVE
 SUITE 300
City-State-Zip: AUSTIN TX 78758

Title DIRECTOR
Name STOY, PETER A.
Address 10910 DOMAIN DRIVE
 SUITE 300
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.

SIGNATURE: SCOTT ROWE**ASSISTANT SECRETARY 04/22/2024**

Electronic Signature of Signing Officer/Director Detail

Date