2021 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F08000003974

Entity Name: MEDMARK SERVICES. INC.

Current Principal Place of Business:

1720 LAKEPOINTE DRIVE

SUITE 117

LEWISVILLE, TX 75057

Current Mailing Address:

1720 LAKEPOINTE DRIVE

SUITE 117

LEWISVILLE, TX 75057 US

FEI Number: 59-2212083 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:

City-State-Zip:

Address

Electronic Signature of Registered Agent

Date

FILED Apr 22, 2021

Secretary of State

6405735736CC

Officer/Director Detail:

Title PRESIDENT/CEO Title DIRECTOR

Name WHITE, DAVID Name KLETTER, MICHELLE

Address 1720 LAKEPOINTE DRIVE Address 1720 LAKEPOINTE DRIVE

SUITE 117 SUITE 117

LEWISVILLE TX 75057 City-State-Zip: LEWISVILLE TX 75057

Title EXECUTIVE VICE PRESIDENT Title TREASURER/CFO

Name D'ANDRIA, GILBERT Name D'ANDRIA, GILBERT

Address 1720 LAKEPOINTE DRIVE Address 1720 LAKEPOINTE DRIVE

SUITE 117 SUITE 117

City-State-Zip: LEWISVILLE TX 75057 City-State-Zip: LEWISVILLE TX 75057

 Title
 DIRECTOR
 Title
 DIRECTOR

 Name
 KLETTER, JASON
 Name
 WHITE, DAVID

Address 1720 LAKEPOINTE DRIVE Address 1720 LAKEPOINTE DRIVE

SUITE 117 SUITE 117

City-State-Zip: LEWISVILLE TX 75057 City-State-Zip: LEWISVILLE TX 75057

Title SENIOR VP, PRIMARY CARE AND Title EXECUTIVE VICE PRESIDENT

MENTAL HEALTH Name KLETTER, JASON

Name KLETTER, MICHELLE Address 1720 LAKEPOINTE DRIVE

1720 LAKEPOINTE DRIVE SUITE 117
SUITE 117

City-State-Zip: LEWISVILLE TX 75057

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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: FRANK BAUMANN SECRETARY 04/22/2021

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

Title COO

Name BAUMANN, FRANK

Address 1720 LAKEPOINTE DRIVE

SUITE 117

City-State-Zip: LEWISVILLE TX 75057

Title SECRETARY

Name BAUMANN, FRANK

Address 1720 LAKEPOINTE DRIVE

SUITE 117

City-State-Zip: LEWISVILLE TX 75057

Title EXECUTIVE VICE PRESIDENT

Name BAUMANN, FRANK

Address 1720 LAKEPOINTE DRIVE

SUITE 117

City-State-Zip: LEWISVILLE TX 75057