

2023 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F13000002001

Entity Name: HEALTHCARE MANAGEMENT OF AMERICA, INC.

Current Principal Place of Business:

3310 WEST END AVENUE, SUITE 700,
NASHVILLE, TN 37203

Current Mailing Address:

3310 WEST END AVENUE, SUITE 700,
NASHVILLE, TN 37203 US

FEI Number: 45-4931741

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 PRESIDENT/CEO
Name MEREDITH, TODD J
Address 3310 WEST END AVENUE, SUITE 700,
City-State-Zip: NASHVILLE TN 37203

Title SECRETARY
Name LOOPE, ANDREW E
Address 3310 WEST END AVENUE, SUITE 700,
City-State-Zip: NASHVILLE TN 37203

Title TREASURER
Name DONOVAN, CHRIS
Address 3310 WEST END AVENUE, SUITE 700,
City-State-Zip: NASHVILLE TN 37203

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: ANDREW E. LOOPE

SECRETARY

04/26/2023

Electronic Signature of Signing Officer/Director Detail

Date