

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 768919

**FILED
Mar 06, 2016
Secretary of State
CC3783007790**

Entity Name: 4139 MANAGEMENT, INC.

Current Principal Place of Business:

4139 S ATLANTIC AVE
NEW SMYRNA BEACH, FL 32169

Current Mailing Address:

4139 S ATLANTIC AVE
NEW SMYRNA BEACH, FL 32169 US

FEI Number: 59-2334672

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BROOKE, NELSON A
255 MINORCA BEACH WAY STE 405
NEW SMYRNA BEACH, FL 32169 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, SECRETARY
Name BROOKE, NELSON
Address 255 MINORCA BEACH WAY 405
City-State-Zip: NEW SMYRNA BEACH FL 32169

Title PRESIDENT
Name MARKLAND, BRENDA
Address 271 WEST CITRUS STREET
City-State-Zip: ALTAMONTE SPRINGS FL 32714

Title DIRECTOR
Name MASAITIS, JACK
Address 4139 S. ATLANTIC AVENUE
 B-109
City-State-Zip: NEW SMYRNA BEACH FL 32169

Title DIRECTOR
Name BOURLIER, TERRY
Address 4139 S. ATLANTIC AVENUE
 UNIT A-401
City-State-Zip: NEW SMYRNA BEACH FL 32169

Title VP
Name KENT, RICHARD
Address 4139 S ATLANTIC AVE
 B304
City-State-Zip: NEW SMYRNA BEACH FL 32169

Title DIRECTOR
Name ABBOTT, RAY
Address 4139 S ATLANTIC AVE
 B601
City-State-Zip: NEW SMYRNA BEACH FL 32169

Title DIRECTOR
Name HOFFMAN, FRED
Address 4139 S ATLANTIC AVE
 B101
City-State-Zip: NEW SMYRNA BEACH FL 32169

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: NELSON A BROOKE

TREASURER

03/06/2016

Electronic Signature of Signing Officer/Director Detail

Date