

**2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N08000002405

**FILED**  
**Jan 06, 2016**  
**Secretary of State**  
**CC3501703490**

**Entity Name:** HERNANDO PRIMATE, INC.

**Current Principal Place of Business:**

14495 CHICARIC RD.  
BROOKSVILLE, FL 34614

**Current Mailing Address:**

14495 CHICARIC RD.  
BROOKSVILLE, FL 34614 US

**FEI Number:** 20-8561755

**Certificate of Status Desired:** Yes

**Name and Address of Current Registered Agent:**

KELLY, ANN M  
14495 CHICARIC RD.  
BROOKSVILLE, FL 34614 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            CEO  
Name            KELLY, ANN M  
Address        14495 CHICARIC RD.  
City-State-Zip: BROOKSVILLE FL 34614

Title            STD  
Name            KELLY, KERRY  
Address        14495 CHICARIC RD.  
City-State-Zip: BROOKSVILLE FL 34614

Title            VC  
Name            CARLIN, MICHELLE  
Address        14495 CHICARIC RD.  
City-State-Zip: BROOKSVILLE FL 34614

*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:** ANN M. KELLY

CEO

01/06/2016

Electronic Signature of Signing Officer/Director Detail

Date