

**2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N09000002069

**FILED  
Feb 21, 2017  
Secretary of State  
CC3108777792**

**Entity Name:** THE PERFECT PLACE-PHASE ONE INC.

**Current Principal Place of Business:**

158 TOMOKA AVE  
ORMOND BEACH, FL 32174

**Current Mailing Address:**

158 TOMOKA AVE  
ORMOND BCH, FL 30135 US

**FEI Number: 90-0513044**

**Certificate of Status Desired: No**

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

MOREY, ROSA  
158 TOMOKA AVE  
ORMOND BEACH, FL 32174 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 P  
Name MOREY, ROSA E  
Address 158 TOMOKA AVE  
City-State-Zip: ORMOND BEACH FL 32174

Title TRUSTEE  
Name GEORGE, BOBBIE J  
Address 242 WASHINGTON STREET SOUTH  
City-State-Zip: ORMOND FL 32174

Title SECRETARY  
Name DOWNS, CLARENCE W  
Address 126 N. KEECH ST.  
City-State-Zip: DAYTONA BEACH FL 32114

*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: ROSA MOREY**

**PRESIDENT**

**02/21/2017**

Electronic Signature of Signing Officer/Director Detail

Date