

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

DOCUMENT# N11000000633

**Entity Name:** FLORIDA CARRY, INC.

**Current Principal Place of Business:**

1090 WILD HOLLY DRIVE  
PORT ORANGE, FL 32129

**Current Mailing Address:**

1090 WILD HOLLY DRIVE  
PORT ORANGE, FL 32129 US

**FEI Number:** 27-4603081

**Certificate of Status Desired:** No

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

CARANNA, SEAN C  
1090 WILD HOLLY DR  
PORT ORANGE, FL 32129 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 EXECUTIVE DIRECTOR  
Name CARANNA, SEAN C  
Address 1090 WILD HOLLY DRIVE  
City-State-Zip: PORT ORANGE FL 32129

Title EXECUTIVE DIRECTOR  
Name NASCAK, RICHARD A  
Address 503 E 6TH STREET  
City-State-Zip: LEHIGH ACRES FL 33972

Title SECRETARY  
Name DYKES, JAMES B  
Address 4360 STONEY POINT ROAD  
City-State-Zip: MELBOURNE FL 32940

Title DIRECTOR  
Name WHIGHAM, MICHAEL S  
Address 6349 FORDHAM CIRCLE  
City-State-Zip: JACKSONVILLE FL 32217

Title DIRECTOR  
Name WAGONER, CHRISTOPHER E  
Address 8235 SW 102 AVE  
City-State-Zip: GAINESVILLE FL 32608

*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:** SEAN C CARANNA

**EXECUTIVE DIRECTOR**

**02/09/2017**

Electronic Signature of Signing Officer/Director Detail

Date