

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N11000003829

**Entity Name:** PAULOS GROUP, INC.**Current Principal Place of Business:**3170 AIRMANS DR UNIT 1085-PALO  
FORT PIERCE, FL 34946**Current Mailing Address:**3170 AIRMANS DR UNIT 1085-PALO  
FORT PIERCE, FL 34946**FEI Number:** 45-3141310**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**MCCORMICK, MATTHEW  
3170 AIRMANS DR UNIT 1085-PALO  
FORT PIERCE, FL 34946 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	PARTNER, PRESIDENT
Name	MCCORMICK, MATTHEW
Address	3170 AIRMANS DR UNIT 1085-PALO
City-State-Zip:	FORT PIERCE FL 34946

Title	PARTNER, PRESIDENT
Name	GAUTHIER, SHANE
Address	3170 AIRMANS DR UNIT 1085-PALO
City-State-Zip:	FORT PIERCE FL 34946

Title	CHAIRMAN
Name	PHILIP, MICHAEL
Address	3170 AIRMANS DR UNIT 1085-PALO
City-State-Zip:	FORT PIERCE FL 34946

Title	DIRECTOR
Name	OKALL, DAN
Address	3170 AIRMANS DR UNIT 1085-PALO
City-State-Zip:	FORT PIERCE FL 34946

Title	DIRECTOR
Name	SANDERS, ETHAN
Address	3170 AIRMANS DR UNIT 1085-PALO
City-State-Zip:	FORT PIERCE FL 34946

Title	DIRECTOR
Name	AARDSMA, MARK
Address	3170 AIRMANS DR UNIT 1085-PALO
City-State-Zip:	FORT PIERCE FL 34946

*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:** MATTHEW MCCORMICK

PARTNER

01/09/2015

Electronic Signature of Signing Officer/Director Detail

Date