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: VICTOR WAGNER

Electronic Signature of Signing Officer/Director Detail

DOCUMENT# N1800002717

Entity Name: FLORIDA REAL ESTATE EXCHANGORS INC.

## **Current Principal Place of Business:**

21035 MEEHAN AVENUE PORT CHARLOTTE, FL 33952

## **Current Mailing Address:**

21035 MEEHAN AVENUE PORT CHARLOTTE . FL 33952 US

# FEI Number: 82-4723058

# Name and Address of Current Registered Agent:

WAGNER, VICTOR 21035 MEEHAN AVENUE PORT CHARLOTTE , FL 33952 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

# **Officer/Director Detail :**

Title	P	Title	VP
Name	WAGNER, VICTOR	Name	MAPP, TIMOTHY
Address	21035 MEEHAN AVENUE	Address	21035 MEEHAN AVENUE
City-State-Zip:	PORT CHARLOTTE FL 33952	City-State-Zip:	PORT CHARLOTTE FL 33952

PRESIDENT

04/27/2023

FILED Apr 27, 2023 Secretary of State 0923537362CC

Date

Certificate of Status Desired: No

Date