

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000005053

FILED
Apr 28, 2017
Secretary of State
CC0851453271

Entity Name: PFXA, INC.

Current Principal Place of Business:

2350 LEGENDS WAY
CLERMONT, FL 34711

Current Mailing Address:

2350 LEGENDS WAY
CLERMONT, FL 34711 US

FEI Number: 59-3470283

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BRET JONES, P.A.
700 ALMOND STREET
CLERMONT, FL 34711 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	SECRETARY, CHAIRMAN	Title	EXECUTIVE DIRECTOR, PRESIDENT
Name	RICHARDSON, DOROTHY DR.	Name	STRANGE, ALISON ESQ.
Address	2350 LEGENDS WAY	Address	700 ALMOND STREET
City-State-Zip:	CLERMONT FL 34711	City-State-Zip:	CLERMONT FL 34711

Title	CHAIRPERSON	Title	VC
Name	JONES, JOANN DR.	Name	DECLERCQ, ANDREW
Address	12201 CYPRESS LANDING AVENUE	Address	10812 PRIEBE ROAD
City-State-Zip:	CLERMONT FL 34711	City-State-Zip:	CLERMONT FL 34711

Title	DIRECTOR, VP	Title	BOARD MEMBER
Name	BORAK , ROBERT K II	Name	VAUGHT, AVIS
Address	2350 LEGENDS WAY	Address	2350 LEGENDS WAY
City-State-Zip:	CLERMONT FL 34711	City-State-Zip:	CLERMONT FL 34711

Title	DIRECTOR
Name	ROTTA, SARAH
Address	2350 LEGENDS WAY
City-State-Zip:	CLERMONT FL 34711

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: ALISON STRANGE

EXECUTIVE DIRECTOR

04/28/2017

Electronic Signature of Signing Officer/Director Detail

Date