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 607, Florida Statutes; and that my name appears
above, or on an attachment with all other like empowered.

SIGNATURE: JANET L. COX

Electronic Signature of Signing Officer/Director Detail

Entity Name: ROCKER REALTY, INC.

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

684 WEST MONTROSE STREET CLERMONT, FL 34711-2120

## **Current Mailing Address:**

684 WEST MONTROSE STREET CLERMONT. FL 34711-2120

## FEI Number: 59-2188859

# Name and Address of Current Registered Agent:

COX, JANET L 684 MONTROSE ST CLERMONT, FL 34711 US

Date

Certificate of Status Desired: No

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	PSTD	Title	VD	
Name	COX, JANET L	Name	ROCKER, MARY T	
Address	560 MAR NAN MAR PLACE	Address	320 E LAKESHORE DR	
City-State-Zip:	CLERMONT FL 34711-2120	City-State-Zip:	CLERMONT, FL	00000 FL 34711

01/29/2016

**OWNER/BROKER** 

Date