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: RICHARD W WINESETT

Electronic Signature of Signing Officer/Director Detail

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City-State-Zip: DULUTH MN 55803

	8 8 8		
Officer/Director Detail :			
Title	DP	Title	DVST
Name	WINESETT, RICHARD W	Name	WINESETT, ROBERT A
Address	1574 PASSAIC AVE	Address	3201 SEA HAVEN COURT #3
City-State-Zip:	FT. MYERS FL 33901	City-State-Zip:	N. FT. MYERS FL 33903
Title	VP, DIRECTOR		
Name	WINESETT, NATHAN S.		
Address	3465 TROY BRET TRAIL		

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:

Name and Address of Current Registered Agent:

WINESETT, RICHARD W

Electronic Signature of Registered Agent

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Current Principal Place of Business:

Entity Name: ELI WINESETT & SONS, INC.

27655 JONES LOOP RD PUNTA GORDA, FL 33982-2300

DOCUMENT# F80865

Current Mailing Address:

P.O. DRAWER 610 FT MYERS, FL 33902 US

FEI Number: 59-2193329

2248 FIRST STREET FT MYERS, FL 33901 US Certificate of Status Desired: No

PRESIDENT

Date

Date