

2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G93359

Entity Name: APPLIED TECHNOLOGY AND MANAGEMENT, INC.**Current Principal Place of Business:**411 PABLO AVE
JACKSONVILLE BEACH, FL 32250**Current Mailing Address:**2201 NW 40TH TERRACE
GAINESVILLE, FL 32605-3574 US**FEI Number: 59-2413268****Certificate of Status Desired: Yes****Name and Address of Current Registered Agent:**SWANN, STEPHEN C
411 PABLO AVE
JACKSONVILLE BEACH, FL 32250 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	DIR
Name	SWANN, STEPHEN C
Address	332 3RD ST
City-State-Zip:	ATLANTIC BEACH FL 32233

Title	VP
Name	PEENE, STEVE
Address	2508 HEATHROW DR
City-State-Zip:	TALLAHASSEE FL 32312

Title	VP
Name	BAZEMORE, GARY W
Address	5 YAWL DR
City-State-Zip:	COCOA BEACH FL 32931

Title	C
Name	MODZELEWSKI, EDWARD
Address	10 OKATHE RD
City-State-Zip:	OKATIE SC 29910

Title	PRES
Name	PHELGAR, W. SAMUEL
Address	533 CALICO RETREAT
City-State-Zip:	MOUNT PLEASANT SC 29464

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: STEPHEN C SWANN**DIRECTOR****01/04/2017**_____
Electronic Signature of Signing Officer/Director Detail_____
Date