## **2024 FLORIDA PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# H84690

**Entity Name: OREVERO CORPORATION** 

**Current Principal Place of Business:** 

5526 TRACEY BRUCE DR ADAMSTOWN. MD 21710

**Current Mailing Address:** 

5526 TRACEY BRUCE DR ADAMSTOWN, MD 21710 US

FEI Number: 59-2593365 Certificate of Status Desired: No

FILED Jan 04, 2024

**Secretary of State** 

8746808364CR

Date

Date

Name and Address of Current Registered Agent:

BARTON, KATHRYN 570 BEACHLAND BLVD. VERO BEACH, FL 32963 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: KATHRYN BARTON 01/04/2024

Title

Title

DIRECTOR

**DIRECTOR** 

Electronic Signature of Registered Agent

Officer/Director Detail:

Title DIRECTOR Title DIRECTOR

NameSHERMAN, ROBERT SNameSHERMAN, ROGER HAddress19 MELODY LNAddress11208 BALTUSROL DRIVECity-State-Zip:PELHAM NH 03076City-State-Zip:FORT MILL SC 29707

Name SHERMAN, THOMAS Name SHERMAN, CHRISTINA

Address 74 WEBB STREET Address 1258 MASSACHUSETTS AVENUE

City-State-Zip: LEXINGTON MA 02420

Electronic Signature of Signing Officer/Director Detail

City-State-Zip: BOSTON MA 02125

Title PRESIDENT

**TREASURER** 

Title

Name WIGFIELD, LINDSEY Name PERKINS, NATHANIEL

Address 5758 SWEETBAY COURT Address 11014 SWANSFIELD DRIVE

City-State-Zip: FREDERICK MD 21703 City-State-Zip: COLUMBIA MD 21044

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: THOMAS SHERMAN TREASURER 01/04/2024