person contribution to the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal affect as if made under

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: CHRISTOPHER C CLONEY

Electronic Signature of Signing Officer/Director Detail

SIGNATURE	JOHN H. EVANS, ESQ.			02/07/2018	
	Electronic Signature of Registered Agent			Date	
Officer/Director Detail :					
Title	P/D	Title	VP/D		
Name	CLONEY, CHRISTOPHER C	Name	CLONEY, JULIE M		
Address	5505 N ATLANTIC AVE - STE. 202	Address	5505 N ATLANTIC AVE - STE. 20	)2	
City-State-Zip:	COCOA BEACH FL 32931	City-State-Zip:	COCOA BEACH FL 32931		

## 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.

# 5505 N ATLANTIC AVE - STE. 202

COCOA BEACH. FL 32931 US

#### FEI Number: 59-2766577

### Name and Address of Current Registered Agent:

EVANS, JOHN H ESQ. 1702 S WASHINGTON AVE TITUSVILLE, FL 32780 US

**Current Mailing Address:** 

**Current Principal Place of Business:** 

5505 N ATLANTIC AVE - STE. 202 COCOA BEACH, FL 32931

#### DOCUMENT# J51129 Entity Name: CLONEY & CLONEY, P.A.

2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT

#### FILED Feb 07, 2018 Secretary of State CC6389838527

Certificate of Status Desired: No

PRESIDENT

02/07/2018

Date