# SIGNATURE: THOMAS BAUR

above, or on an attachment with all other like empowered.

Electronic Signature of Signing Officer/Director Detail

## 2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J53470

Entity Name: APOGEE MANAGEMENT, INC.

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

2011 S PERIMETER ROAD SUITE F FT. LAUDERDALE, FL 33309

### **Current Mailing Address:**

2011 S PERIMETER ROAD SUITE F FT. LAUDERDALE, FL 33309

### FEI Number: 59-2763139

### Name and Address of Current Registered Agent:

Electronic Signature of Registered Agent

HARDEN DAVID C. 500 E. BROWARD BLVD SUITE 1950 FT. LAUDERDALE, FL 33394 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:

## Officer/Director Detail

| Officer/Director Detail : |                          |                 |                          |  |
|---------------------------|--------------------------|-----------------|--------------------------|--|
| Title                     | PSD                      | Title           | DVP                      |  |
| Name                      | BAUR THOMAS E.           | Name            | BAUR, CINDY              |  |
| Address                   | 2601 SW 14TH COURT       | Address         | 2601 SW 14TH COURT       |  |
| City-State-Zip:           | DEERFIELD BEACH FL 33442 | City-State-Zip: | DEERFIELD BEACH FL 33442 |  |

| Zip: | DEERFIELD BEACH FL 33442 | City-State-Zip: | DEERFIELD BEACH FL 33442 |
|------|--------------------------|-----------------|--------------------------|
|      |                          |                 |                          |
|      |                          |                 |                          |
|      |                          |                 |                          |

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

PRESIDENT

## FILED Mar 08, 2016 Secretary of State CC5991154260

Certificate of Status Desired: No

03/08/2016

Date

Date