

**2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# J61228

**Entity Name:** FALCONE DEVELOPMENT, INC.

**Current Principal Place of Business:**

1645 PALM BEACH LAKES BLVD  
1200  
WEST PALM BEACH , FL 33401

**Current Mailing Address:**

1951 NW 19TH STREET  
SUITE 200  
BOCA RATON, FL 33431 US

**FEI Number:** 59-2789035

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

FALCONE, ARTHUR  
1951 NW 19TH STREET  
SUITE 200  
BOCA RATON, FL 33431 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 P  
Name FALCONE, EDWARD  
Address 1951 NW 19TH STREET SUITE 200  
City-State-Zip: BOCA RATON FL 33431

Title CEO  
Name FALCONE, ARTHUR  
Address 1951 NW 19TH STREET SUITE 200  
City-State-Zip: BOCA RATON FL 33431

*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:** ARTHUR FALCONE

VP

04/22/2015

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date