

**2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P01000028888

**Entity Name:** AN APPLE A DAY..., INC.

**Current Principal Place of Business:**

2 EAST INDEPENDENT DR, #121  
JACKSONVILLE, FL 32202

**Current Mailing Address:**

5459 CRUZ RD  
#121  
JACKSONVILLE, FL 32207

**FEI Number:** 59-2820169

**Certificate of Status Desired:** No

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

PENNINGTON, MARK GESQUIRE  
1 INDEPENDENT DRIVE, #1700  
JACKSONVILLE, FL 32202 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 DP  
Name SLAVIC, ELMIR  
Address 5459 CRUZ ROAD  
City-State-Zip: JACKSONVILLE FL 32207

Title DV  
Name SLAVIC, JASMIN  
Address 2 EAST INDEPENDENT DR, #121  
City-State-Zip: JACKSONVILLE FL 32202

Title DST  
Name SLAVIC, SENIJA  
Address 2 EAST INDEPENDENT DR, #121  
City-State-Zip: JACKSONVILLE FL 32202

Title D  
Name SLAVIC, NAIL  
Address 2 EAST INDEPENDENT DR, #121  
City-State-Zip: JACKSONVILLE FL 32202

*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:** ELMIR SLAVIC

**PRESIDENT**

**04/22/2015**

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

\_\_\_\_\_  
Date