

**2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P02000047587

**Entity Name:** KATHY WENNERSTROM, P.A.

**Current Principal Place of Business:**

21218 ST. ANDREWS BLVD  
#209  
BOCA RATON, FL 33433

**Current Mailing Address:**

21218 ST. ANDREWS BLVD  
#209  
BOCA RATON, FL 33433

**FEI Number:** 35-2169230

**Certificate of Status Desired:** No

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

WENNERSTROM, KATHY  
21218 ST. ANDREWS BLVD  
#209  
BOCA RATON, FL 33433 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           PTS  
Name           WENNERSTROM, KATHY  
Address        21218 ST. ANDREWS BLVD. #209  
City-State-Zip: BOCA RATON FL 33433

*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:** KATHY WENNERSTROM

PTS

01/16/2016

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

\_\_\_\_\_  
Date