# 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.

PRES

#### SIGNATURE: JOHN STEINWAND

Electronic Signature of Signing Officer/Director Detail

# 2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P03000044607

# Entity Name: ONE SOURCE REAL ESTATE SERVICES CENTER, INC.

# Current Principal Place of Business:

4980 TAMIAMI TR. N. SUITE 200 NAPLES, FL 34103

## **Current Mailing Address:**

4980 TAMIAMI TR. N. SUITE 200 NAPLES, FL 34103

# FEI Number: 30-0150579

# Name and Address of Current Registered Agent:

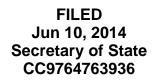
Electronic Signature of Registered Agent

STEINWAND, JOHN A 4980 TAMIAMI TR. N SUITE 200 NAPLES, FL 34103 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 :			
Title	DPTS	Title	S,D
Name	STEINWAND, JOHN A	Name	MILLER, THERESA
Address	4980 TAMIAMI TR. N SUITE 200	Address	4980 TAMIAMI TRAIL N #200
City-State-Zip:	NAPLES FL 34103	City-State-Zip:	NAPLES FL 34103



Certificate of Status Desired: No

06/10/2014 Date

Date