

2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000124268

Entity Name: VAX INC. OF BREVARD

Current Principal Place of Business:

8805 SOUTH TROPICAL TRAIL
MERRITT ISLAND, FL 32952

Current Mailing Address:

8805 SOUTH TROPICAL TRAIL
MERRITT ISLAND, FL 32952

FEI Number: 20-1549910

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

VAXMONSKY, JERRY D
8805 SOUTH TROPICAL TRAIL
MERRITT ISLAND, FL 32952 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 VAXMONSKY, JERRY D
Address 8805 SOUTH TROPICAL TRAIL
City-State-Zip: MERRITT ISLAND FL 32952

Title VP
Name VAXMONSKY, MARIE
Address 8805 SOUTH TROPICAL TRAIL
City-State-Zip: MERRITT ISLAND FL 32952

Title D
Name VAXMONSKY, RYAN
Address 6461 BORASCO DRIVE
City-State-Zip: MELBOURNE FL 32940

Title VP
Name VAXMONSKY, MARIE
Address 8805 SOUTH TROPICAL TRAIL
City-State-Zip: MERRIT ISLAND FL 32952

Title D
Name VAXMONSKY, RYAN
Address 6461 BORASCO DRIVE #2805
City-State-Zip: MELBOURNE FL 32940

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: JERRY VAXMONSKY

P

04/26/2015

Electronic Signature of Signing Officer/Director Detail

Date