

**2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P04000134788

**Entity Name:** ANNEMARIE FILISKY LECLAIR, INC.

**Current Principal Place of Business:**

3704 W. EUCLID AVE.  
TAMPA, FL 33629

**Current Mailing Address:**

3704 W. EUCLID AVE.  
TAMPA, FL 33629

**FEI Number: 80-0123643**

**Certificate of Status Desired: No**

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

FILISKY LECLAIR, ANNEMARIE  
3704 W. EUCLID AVE.  
TAMPA, FL 33629 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            FILISKY LECLAIR, ANNEMARIE  
Address         3704 W. EUCLID AVE.  
City-State-Zip: TAMPA FL 33629

*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: ANNEMARIE FILISKY LECLAIR**

**PRESIDENT**

**04/27/2016**

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

\_\_\_\_\_ Date