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: MICHAEL CHAPMAN

Electronic Signature of Signing Officer/Director Detail

PRESIDENT

01/08/2016

The above named e	entity submits this statement for the purpose of changing i	ts registered office or regis	tered agent, or both, in the State of	Florida.
SIGNATURE:	MICHAEL CHAPMAN			01/08/2016
	Electronic Signature of Registered Agent			Date
Officer/Direct	or Detail :			
Title I	DIRECTOR, PRESIDENT	Title	VP	
Name (CHAPMAN, MICHAEL	Name	VINESKI, EVELYN	
	5683 STRAND CT	Address	5683 STRAND CT STE 7	
	SUITE #7 NAPLES FL 34110	City-State-Zip:	NAPLES FL 34110	
Title	VP			
Name I	ELMAN, NYLA			
Address 5	5683 STRAND CT STE 7			
City-State-Zip:	NAPLES FL 34110			

Name and Address of Current Registered Agent:

AOMAC MANAGERS INC. 5683 STRAND CT SUITE #7 NAPLES, FL 34110 US

SUITE #7 NAPLES, FL 34110 US

FEI Number: 56-2492454

5683 STRAND CT

DOCUMENT# P04000157331

2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT

Entity Name: AMERICAN OVERSEAS MANAGEMENT AND ADMINISTRATION CORPORATION

Current Principal Place of Business:

5683 STRAND CT SUITE #7 NAPLES, FL 34110

Current Mailing Address:

FILED Jan 08, 2016 Secretary of State CC3813624924

Certificate of Status Desired: No

Date