

2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000041502

Entity Name: AMERA ASSOCIATES, INC.**Current Principal Place of Business:**2900 N. UNIVERSITY DRIVE
CORAL SPRINGS, FL 33065**Current Mailing Address:**2900 N. UNIVERSITY DRIVE
CORAL SPRINGS, FL 33065 US**FEI Number:** 20-2556188**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**RAHAEL, GEORGE
2900 N. UNIVERSITY DRIVE
CORAL SPRINGS, FL 33065 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	PRESIDENT
Name	RAHAEL, GEORGE
Address	2900 N. UNIVERSITY DR
City-State-Zip:	CORAL SPRINGS FL 33065

Title	VP, SECRETARY
Name	RAHAEL, PAULINE
Address	2900 N. UNIVERSITY DR
City-State-Zip:	CORAL SPRINGS FL 33065

Title	VP
Name	RAHAEL, GISELE
Address	2900 N. UNIVERSITY DR
City-State-Zip:	CORAL SPRINGS FL 33065

Title	VP
Name	LADD, CHARLES
Address	517 NE 6TH STREET
City-State-Zip:	FORT LAUDERDALE FL 33304

Title	VP
Name	RAHAEL, MICHAEL GEORGE
Address	2900 N. UNIVERSITY DRIVE.
City-State-Zip:	CORAL SPRINGS FL 33065

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: GEORGE RAHAEL**PRESIDENT****04/01/2024**_____
Electronic Signature of Signing Officer/Director Detail_____
Date