

2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000111244

Entity Name: SENSOCON, INC.

Current Principal Place of Business:

3602 DMG DR
SUITE 2
LAKELAND, FL 33811

Current Mailing Address:

P.O. BOX 518
HIGHLAND CITY, FL 33846

FEI Number: 20-3299519

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

KOHL, TONY
5466 PEBBLE BEACH DR
LAKELAND, FL 33812 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 DPST
Name KOHL, TONY E
Address 5466 PEBBLE BEACH DR
City-State-Zip: LAKELAND FL 33812

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: TONY KOHL

PRESIDENT

03/23/2017

_____ Electronic Signature of Signing Officer/Director Detail

_____ Date