# 2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000040525

Entity Name: NANCY ILIFFE P.A.

# **Current Principal Place of Business:**

1530 NORTH RIDGE MEADOW PATH

CITRUS HILLS, FL 34442

# **Current Mailing Address:**

1530 NORTH RIDGE MEADOW PATH CITRU HILLS, FL 34442 US

FEI Number: 20-4545236 Certificate of Status Desired: No

# Name and Address of Current Registered Agent:

ZOMERFELD, RAYMOND J 999 PONCE DE LEON BLVD #1045 CORAL GABLES, FL 33134 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

FILED Feb 22, 2018

**Secretary of State** 

CC8701637096

## Officer/Director Detail:

Title PST

Name ILIFFE, NANCY Address 4722 SW 67 AVE

Α2

SIGNATURE: NANCY L. ILIFFE

City-State-Zip: MIAMI FL 33155

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.

Electronic Signature of Signing Officer/Director Detail

02/22/2018

Date