

**2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P06000141366

**Entity Name:** BRAVE RIFLES, P.A.

**Current Principal Place of Business:**

100 ARRICOLA AVE  
ST. AUGUSTINE, FL 32080

**Current Mailing Address:**

100 ARRICOLA AVE  
ST. AUGUSTINE, FL 32080 US

**FEI Number:** 20-5952289

**Certificate of Status Desired:** No

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

ROY, HINMAN HII  
100 ARRICOLA AVE  
ST AUGUSTINE, FL 32080 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            HINMAN, M.D., P.A., ROY H  
Address        100 ARRICOLA AVENUE  
City-State-Zip: ST. AUGUSTINE FL 32080

*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:** HINMAN, M.D., P.A. , ROY H

**MANAGER**

**02/06/2019**

Electronic Signature of Signing Officer/Director Detail

Date