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 PARISCIANI

Electronic Signature of Signing Officer/Director Detail

Officer/Director Detail :

Title	Р	Title	S
Name	PARISCIANI, MICHAEL J	Name	JUSTER, TAMMY
Address	5698 RON RD	Address	437 WILMINGTON CIRCLE
City-State-Zip:	ST CLOUD FL 34771	City-State-Zip:	OVIEDO FL 32765

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.

2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P0700000406

Entity Name: NATIVE BAIL BONDS, INC

Current Principal Place of Business:

72 E. MAIN ST 200 APOPKA, FL 32703

Current Mailing Address:

72 E. MAIN ST 200 APOPKA, FL 32703 US

FEI Number: 20-8137197

Name and Address of Current Registered Agent:

Electronic Signature of Registered Agent

PARISCIANI, MICHAEL J 5698 RON RD ST CLOUD, FL 34771 US

SIGNATURE:

Certificate of Status Desired: No

04/22/2015

PRES

Date

Date

FILED Apr 22, 2015 Secretary of State CC6552552218