

**2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P08000090757

**Entity Name:** RETAIL ASSETS, INC.

**Current Principal Place of Business:**

10739 DEERWOOD PARK BLVD  
SUITE 300  
JACKSONVILLE, FL 32256

**Current Mailing Address:**

10739 DEERWOOD PARK BLVD  
SUITE 300  
JACKSONVILLE, FL 32256 US

**FEI Number:** 26-3485264

**Certificate of Status Desired:** No

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

SLEIMAN, PETER D  
10739 DEERWOOD PARK BLVD  
SUITE 300  
JACKSONVILLE, FL 32256 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            | SLEIMAN, PETER D                 |
| Address         | 10739 DEERWOOD PARK BLVD STE 300 |
| City-State-Zip: | JACKSONVILLE FL 32256            |

|                 |                                    |
|-----------------|------------------------------------|
| Title           | VP                                 |
| Name            | MANLEY, CARRIE L                   |
| Address         | 10739 DEERWOOD PARK BLVD SUITE 300 |
| City-State-Zip: | JACKSONVILLE FL 32256              |

*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:** PETER D SLEIMAN

P

03/14/2018

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date