

**2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P09000060539

**Entity Name:** 515 AMELIA, INC.

**Current Principal Place of Business:**

4200 NORTHCORP PARKWAY  
SUITE 185  
PALM BCH GARDENS, FL 33410

**Current Mailing Address:**

4200 NORTHCORP PARKWAY  
SUITE 185  
PALM BCH GARDENS, FL 33410 US

**FEI Number:** 27-1330456

**Certificate of Status Desired:** No

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

GEHRING, KURT  
4200 NORTHCORP PARKWAY  
SUITE 185  
PALM BCH GARDENS, FL 33410 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            D  
Name            GEHRING, KURT  
Address        4200 NORTHCORP PARKWAY  
                  SUITE 185  
City-State-Zip: PALM BCH GARDENS FL 33410

Title            D  
Name            GEHRING, LINDA S  
Address        4200 NORTHCORP PARKWAY  
                  SUITE 185  
City-State-Zip: PALM BCH GARDENS FL 33410

*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:** KURT GEHRING

**DIRECTOR**

**04/18/2018**

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

\_\_\_\_\_  
Date