

**2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P09000099685

**Entity Name:** GEMENT, INC

**Current Principal Place of Business:**

2607 LAZY HAMMOCK LANE  
FT PIERCE, FL 34981

**Current Mailing Address:**

2607 LAZY HAMMOCK LANE  
FT PIERCE, FL 34981

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** No

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

RUBY, EDWARD  
2607 LAZY HAMMOCK LANE  
FT PIERCE, FL 34981 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 RUBY, EDWARD  
Address 2607 LAZY HAMMOCK LANE  
City-State-Zip: FT PIERCE FL 34981

Title VP  
Name RUBY, PATRICIA  
Address 2607 LAZY HAMMOCK LANE  
City-State-Zip: FT PIERCE FL 34981

*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:** PATRICIA L. RUBY

VP

04/05/2016

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

\_\_\_\_\_  
Date