

2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P09000100718

Entity Name: EMERSON PLAZA II, INC.**Current Principal Place of Business:**370 CENTERPOINTE CIR STE 1136
ALTAMONTE SPRINGS, FL 32701**Current Mailing Address:**370 CENTERPOINTE CIR STE 1136
ALTAMONTE SPRINGS, FL 32701 US**FEI Number:** 27-1863326**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**BOLENA, COLLEEN
370 CENTERPOINTE CIR STE 1136
ALTAMONTE SPRINGS, FL 32701 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:** COLLEEN BOLENA

03/14/2017

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	DIRECTOR
Name	JONES, PETER E
Address	370 CENTERPOINTE CIR STE 1136
City-State-Zip:	ALTAMONTE SPRINGS FL 32701

Title	VP, TREASURER
Name	THOMAS, SHARON L
Address	370 CENTERPOINTE CIR STE 1136
City-State-Zip:	ALTAMONTE SPRINGS FL 32701

Title	DIRECTOR, PRESIDENT
Name	CLABER, JONATHAN
Address	370 CENTERPOINTE CIR STE 1136
City-State-Zip:	ALTAMONTE SPRINGS FL 32701

Title	VP, SECRETARY
Name	PITT, LAWRENCE B
Address	370 CENTERPOINTE CIR STE 1136
City-State-Zip:	ALTAMONTE SPRINGS FL 32701

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: JONATHAN CLABER

PRESIDENT

03/14/2017

Electronic Signature of Signing Officer/Director Detail

Date