

**2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P10000031189

**Entity Name:** COVERSTAND, INC.**Current Principal Place of Business:**5323 MILLENIA LAKES BLVD.  
SUITE 230  
ORLANDO, FL 32839**Current Mailing Address:**5323 MILLENIA LAKES BLVD.  
SUITE 230  
ORLANDO, FL 32839 US**FEI Number:** 27-2375199**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**TAYLOR, ALAN B  
5728 MAJOR BLVD.  
SUITE 700  
ORLANDO, FL 32819 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	WRIEDT, BRADLEY E
Address	11809 WATERSTONE LOOP DR.
City-State-Zip:	WINDERMERE FL 34786

Title	D
Name	DEHART, PAUL
Address	9133 ROYAL GATE DR.
City-State-Zip:	WINDERMERE FL 34786

Title	D
Name	HICKEN, HUTCH K
Address	2578 DANIELLE DR.
City-State-Zip:	OVEIDO FL 32765

Title	D
Name	SCHMIDT, STEPHEN J
Address	8003 MARCELLA DR.
City-State-Zip:	ORLANDO FL 32836

Title	D
Name	CULLEN, JOHN C
Address	13132 FOX GLOVE STREET
City-State-Zip:	WINTER GARDEN FL 34787

Title	D
Name	TAYLOR, ALAN B
Address	1224 SHELTER ROCK RD.
City-State-Zip:	ORLANDO FL 32801

*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:** STEPHEN SCHMIDT**DIRECTOR/SECRETARY** 03/17/2015\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date