

**2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P11000003019

**FILED**  
**Jan 29, 2014**  
**Secretary of State**  
**CC0100562660**

**Entity Name:** WAICHULIS CONSULTING P.A.

**Current Principal Place of Business:**

15036 BRIAR RIDGE CIRCLE  
FORT MYERS, FL 33912

**Current Mailing Address:**

15036 BRIAR RIDGE CIRCLE  
FORT MYERS, FL 33912 US

**FEI Number:** 27-4533536

**Certificate of Status Desired:** No

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

WAICHULIS, WILLIAM  
15036 BRIAR RIDGE CIRCLE  
FORT MYERS, FL 33912 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, D  
Name WAICHULIS, WILLIAM  
Address 15036 BRIAR RIDGE CIRCLE  
City-State-Zip: FORT MYERS FL 33912

Title S  
Name WAICHULIS, WILLIAM J  
Address 15036 BRIAR RIDGE CIRCLE  
City-State-Zip: FORT MYERS FL 33912

Title T  
Name WAICHULIS, JOSEPH  
Address 15036 BRIAR RIDGE CIRCLE  
City-State-Zip: FORT MYERS FL 33912

*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:** WILLIAM WAICHULIS

**PRESIDENT**

**01/29/2014**

Electronic Signature of Signing Officer/Director Detail

Date