

2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P11000032500

Entity Name: ORE PROPERTY ONE, INC.

Current Principal Place of Business:

5 SARNOWSKI DR
GLENVILLE, NY 12302

FILED
Mar 21, 2016
Secretary of State
CC2584881156

Current Mailing Address:

5 SARNOWSKI DR
GLENVILLE, NY 12302

FEI Number: 45-3509076

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 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 DVT
Name CUSHING, ROBERT T
Address 5 SARNOWSKI DR
City-State-Zip: GLENVILLE NY 12302

Title DP
Name MCCORMICK, ROBERT J
Address 5 SARNOWSKI DR
City-State-Zip: GLENVILLE NY 12302

Title CEO
Name MCCORMICK, ROBERT J
Address 5 SARNOWSKI DR
City-State-Zip: GLENVILLE NY 12302

Title DV
Name SALVADOR, SCOT R
Address 5 SARNOWSKI DR
City-State-Zip: GLENVILLE NY 12302

Title S
Name LEONARD, ROBERT M
Address 5 SARNOWSKI DR
City-State-Zip: GLENVILLE NY 12302

Title DV
Name OZIMEK, MICHAEL M
Address 5 SARNOWSKI DR
City-State-Zip: GLENVILLE NY 12302

Title DV
Name SCHRECK, ERIC W
Address 5 SARNOWSKI DR
City-State-Zip: GLENVILLE NY 12302

Title DV
Name CURLEY, KEVIN M
Address 5 SARNOWSKI DR
City-State-Zip: GLENVILLE NY 12302

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: MICHAEL M. OZIMEK

DV

03/21/2016

Electronic Signature of Signing Officer/Director Detail

Date