## 2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P13000064619

**Entity Name: SYSTEMFIVE CORPORATION** 

**Current Principal Place of Business:** 

24890 EBRO CT

BONITA SPRINGS. FL 34135

**Current Mailing Address:** 

24890 EBRO CT

BONITA SPRINGS. FL 34135 US

FEI Number: 46-3377330 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

KOBE, THOMAS 24890 EBRO CT

BONITA SPRINGS, FL 34135 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

FILED May 01, 2015

**Secretary of State** 

CC9537924030

Officer/Director Detail:

Title P Title VP

Name SCHERRER, KURT Name SCHERRER, ISABELLE

Address 24890 EBRO CT Address 24890 EBRO CT

City-State-Zip: BONITA SPRINGS FL 34135 City-State-Zip: BONITA SPRINGS FL 34135

Title D

Name KOBE, THOMAS Address 24890 EBRO CT

City-State-Zip: BONITA SPRINGS FL 34135

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.

Ρ

SIGNATURE: SCHERRER KURT

Electronic Signature of Signing Officer/Director Detail

05/01/2015

Date