

**2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P13000096555

**Entity Name:** 5 SQUARE RESEARCH, INC.

**Current Principal Place of Business:**

5414 30TH AVENUE SOUTH  
GULFPORT, FL 33707

**Current Mailing Address:**

6800 GULFPORT BLVD. S  
SUITE 201-550  
SOUTH PASADENA, FL 33707 US

**FEI Number:** 46-4231323

**Certificate of Status Desired:** No

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

LAPOINTE, MATTHEW J ESQ.  
2451 N. MCMULLEN BOOTH ROAD  
SUITE 200  
CLEARWATER, FL 33759 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            PRESIDENT  
Name            STUTH, KAREN L  
Address        PO BOX 1636  
City-State-Zip: PALMER LAKE CO 80133

Title            VP  
Name            MANCUSO, JOAN T  
Address        MANCUSO , JOAN T 5414 30TH  
                  AVENUE SOUTH  
City-State-Zip: GULFPORT FL 33707

Title            SECRETARY  
Name            BUCZEK, JANET  
Address        264 WOODPOND RD  
City-State-Zip: CHESHIRE CT 06410

Title            TREASURER  
Name            BAQAR, SARWAR  
Address        21955 WINDOVER DRIVE  
City-State-Zip: BROADLANDS VA 20148

*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:** KAREN L STUTH

**PRESIDENT**

**01/05/2015**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date