

**2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P14000001910

**Entity Name:** MARLENE L. KRANCHICK PA

**Current Principal Place of Business:**

845 SW HABITAT LANE  
PALM CITY, FL 34990

**Current Mailing Address:**

845 SW HABITAT LANE  
PALM CITY, FL 34990 US

**FEI Number:** 46-4470447

**Certificate of Status Desired:** No

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

FEIGENBAUM & FEIGENBAUM PA  
1700 W. WOOLBRIGHT RD.  
SUITE 6  
BOYNTON BEACH, FL 33426 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  
Name KRANCHICK, MARLENE L  
Address 845 SW HABITAT LANE  
City-State-Zip: PALM CITY FL 34990

*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:** MARLENE KRANCHICK

**PRESIDENT**

**02/10/2017**

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

\_\_\_\_\_  
Date