

**2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P14000028534

**FILED**  
**Jan 05, 2015**  
**Secretary of State**  
**CC5726433187**

**Entity Name:** STEINGER, ISCOE & GREENE - SAN DIEGO, P.A.

**Current Principal Place of Business:**

507 NW LAKE WHITNEY PLACE  
PORT SAINT LUCIE, FL 34986

**Current Mailing Address:**

507 NW LAKE WHITNEY PLACE  
PORT SAINT LUCIE, FL 34986

**FEI Number: 46-5247104**

**Certificate of Status Desired: No**

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

GREENE, SEAN J  
507 NW LAKE WHITNEY PLACE  
STE. 104  
PORT SAINT LUCIE, FL 34986 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 D  
Name STEINGER, MICHAEL S  
Address 507 NW LAKE WHITNEY PLACE  
City-State-Zip: PORT SAINT LUCIE FL 34986

Title D  
Name ISCOE, GARY T  
Address 507 NW LAKE WHITNEY PLACE  
City-State-Zip: PORT SAINT LUCIE FL 34986

Title D  
Name GREENE, SEAN J  
Address 507 NW LAKE WHITNEY PLACE  
City-State-Zip: PORT SAINT LUCIE FL 34986

*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: SEAN J. GREENE**

**DIRECTOR**

**01/05/2015**

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

\_\_\_\_\_  
Date