

**2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P14000042954

**FILED  
Mar 29, 2016  
Secretary of State  
CC5857402061**

**Entity Name:** TREMONT FINANCIAL SERVICES INC.

**Current Principal Place of Business:**

7089 JASPER LEE RD  
WEWAHITCHKA, FL 32465

**Current Mailing Address:**

PO BOX 1024  
WEWAHITCHKA, FL 32465

**FEI Number: 46-5684889**

**Certificate of Status Desired: Yes**

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

TREMONT, JOHN  
7089 JASPER LEE RD  
WEWAHITCHKA, FL 32465 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/D  
Name TREMONT, JOHN  
Address 7089 JASPER LEE RD  
City-State-Zip: WEWAHITCHKA FL 32465

Title VP/T  
Name TREMONT, JOHN  
Address 7089 JASPER LEE RD  
City-State-Zip: WEWAHITCHKA FL 32465

Title S  
Name TREMONT, JOHN  
Address 7089 JASPER LEE RD  
City-State-Zip: WEWAHITCHKA FL 32465

*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: JOHN TREMONT**

**PRESIDENT**

**03/29/2016**

Electronic Signature of Signing Officer/Director Detail

Date