

**2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P14000052228

**Entity Name:** CUSTOM STITCHES FL, INC.

**Current Principal Place of Business:**

3925 LUVERNE ST  
FORT MYERS, FL 33901

**Current Mailing Address:**

PO BOX 62252  
FORT MYERS, FL 33906 US

**FEI Number:** 47-1164862

**Certificate of Status Desired:** No

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

KERIN, JACKELINE O  
3925 LUVERNE ST  
FORT MYERS, FL 33901 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 KERIN, JACKELINE O  
Address PO BOX 62252  
City-State-Zip: FORT MYERS FL 33906

*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:** JACKELINE KERIN

**PRESIDENT**

**03/23/2017**

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

\_\_\_\_\_  
Date