

**2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P15000033724

**Entity Name:** 823 CEDAR COVE ROAD INC.

**Current Principal Place of Business:**

13687 DOUBLETREE TRAIL  
WELLINGTON, FL 33414

**Current Mailing Address:**

13687 DOUBLETREE TRAIL  
WELLINGTON, FL 33414

**FEI Number:** 47-3930418

**Certificate of Status Desired:** No

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

MONESCALCHI, RICHARD J ESQ.  
10200 FOX TRAIL ROAD S.  
SUITE B  
WELLINGTON, FL 33414 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	Title	S/D
Name	SORIERO, EDMUND	Name	SORIERO, LILLIAN
Address	13687 DOUBLETREE TRAIL	Address	13687 DOUBLE TREE TRAIL
City-State-Zip:	WELLINGTON FL 33414	City-State-Zip:	WELLINGTON FL 33414

*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:** LILLIAN SORIERO

**SECRETARY**

**04/14/2016**

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

\_\_\_\_\_  
Date