

2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P15000067142

Entity Name: THE AT WILL GROUP, INC.**Current Principal Place of Business:**3965 TOWN CENTRE BOULEVARD
SUITE 251
ORLANDO, FL 32837**Current Mailing Address:**3965 TOWN CENTRE BOULEVARD
SUITE 251
ORLANDO, FL 32837 US**FEI Number:** APPLIED FOR**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**KOZLOWSKI, OLIVER A
3965 TOWN CENTRE BOULEVARD
SUITE 251
ORLANDO, FL 32837 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 | PRES |
| Name | KOZLOWSKI, OLIVER A |
| Address | 3965 TOWN CENTRE BOULEVARD SUITE 251 |
| City-State-Zip: | ORLANDO FL 32837 |

| | |
|-----------------|---|
| Title | SEC |
| Name | KOZLOWSKI, MERCEDES N |
| Address | 3965 TOWN CENTRE BOULEVARD SUITE 251 |
| City-State-Zip: | ORLANDO FL 32837 |

| | |
|-----------------|---|
| Title | TREA |
| Name | KOZLOWSKI, ELLIOTT A |
| Address | 3965 TOWN CENTRE BOULEVARD SUITE 251 |
| City-State-Zip: | ORLANDO FL 32837 |

| | |
|-----------------|---|
| Title | DIR |
| Name | KOZLOWSKI, OLIVER A |
| Address | 3965 TOWN CENTRE BOULEVARD SUITE 251 |
| City-State-Zip: | ORLANDO FL 32837 |

| | |
|-----------------|---|
| Title | DIR |
| Name | KOZLOWSKI, MERCEDES N |
| Address | 3965 TOWN CENTRE BOULEVARD SUITE 251 |
| City-State-Zip: | ORLANDO FL 32837 |

| | |
|-----------------|---|
| Title | DIR |
| Name | KOZLOWSKI, ELLIOTT A |
| Address | 3965 TOWN CENTRE BOULEVARD SUITE 251 |
| City-State-Zip: | ORLANDO FL 32837 |

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: OLIVER KOZLOWSKI

PRES

03/02/2016

Electronic Signature of Signing Officer/Director Detail_____
Date