

**2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P94000058513

**Entity Name:** SSE AND ASSOCIATES, INC.

**Current Principal Place of Business:**

569 CANAL ST  
NEW SMYRNA BEACH, FL 32168

**Current Mailing Address:**

P.O. BOX 602  
NEW SMYRNA BEACH, FL 32170 US

**FEI Number:** 59-3265072

**Certificate of Status Desired:** Yes

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

EGGERTON, SONYA S  
569 CANAL STREET  
NEW SMYRNA BEACH, FL 32168 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            CEO  
Name            EGGERTON, SONYA  
Address        1059 CRYSTAL CREEK DR  
City-State-Zip: PORT ORANGE FL 32128

Title            P  
Name            WARD, TRACIE  
Address        4533 BURKE STREET  
City-State-Zip: ORLANDO FL 32814

Title            VP  
Name            HANSEN, JAMES C  
Address        464 HARPER RD  
City-State-Zip: PIERSON FL 32180

Title            ST  
Name            EGGERTON, WILLIAM H  
Address        1059 CRYSTAL CREEK DR  
City-State-Zip: PORT ORANGE FL 32128

*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:** TRACIE WARD

**PRESIDENT**

**02/01/2017**

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

\_\_\_\_\_ Date