

**2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P94000060401

**Entity Name:** 41/75 CORP.

**Current Principal Place of Business:**

4005 CAPE HAZE DRIVE  
CAPE HAZE, FL 33946

**Current Mailing Address:**

4005 CAPE HAZE DRIVE  
CAPE HAZE, FL 33946 US

**FEI Number:** 59-3266487

**Certificate of Status Desired:** No

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

ALEXANDER, LARRY B  
505 SOUTH FLAGLER DR.  
SUITE 1100  
WEST PALM BEACH, FL 33401 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 DPST  
Name LITTLESTAR, GARY D  
Address 4005 CAPE HAZE DR  
City-State-Zip: CAPE HAZE FL

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:** GARY D. LITTLESTAR

DPST

02/13/2017

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

\_\_\_\_\_  
Date