

**2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P94000068309

**Entity Name:** TRAVIS WISE MANAGEMENT, INC.

**Current Principal Place of Business:**

1249 U.S. HIGHWAY 27 SOUTH  
SEBRING, FL 33870

**FILED**  
**Jun 09, 2017**  
**Secretary of State**  
**CC4672320267**

**Current Mailing Address:**

1249 U.S. HIGHWAY 27 SOUTH  
SEBRING, FL 33870 US

**FEI Number: 59-2030496**

**Certificate of Status Desired: No**

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

WISE, TRAVIS  
1249 U.S. HIGHWAY 27 SOUTH  
SEBRING, FL 33870 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            D  
Name            WISE, TRAVIS  
Address        1249 U.S. HIGHWAY 27 SOUTH  
City-State-Zip: SEBRING FL 33870

*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: TRAVIS WISE**

**PRESIDENT**

**06/09/2017**

Electronic Signature of Signing Officer/Director Detail

Date