

**2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P95000078130

**Entity Name:** COLETTE M. CORLISS, CPA, P.A.

**Current Principal Place of Business:**

525 THIRD ST NORTH  
SUITE 507  
JACKSONVILLE BEACH, FL 32250

**Current Mailing Address:**

525 THIRD ST NORTH  
SUITE 507  
JACKSONVILLE BEACH, FL 32250 US

**FEI Number:** 59-3341784

**Certificate of Status Desired:** No

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

SELLERS, COLETTE C  
525 THIRD ST NORTH  
SUITE 507  
JACKSONVILLE BEACH, FL 32250 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:** COLETTE C SELLERS

04/29/2016

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title PD  
Name SELLERS, COLETTE C  
Address 525 THIRD ST NORTH  
SUITE 507  
City-State-Zip: JACKSONVILLE BEACH FL 32250

Title DIRECTOR  
Name ROCHE, BRIAN J  
Address 3055 ANTIGUA DRIVE  
City-State-Zip: JACKSONVILLE BEACH FL 32250

*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:** COLETTE CORLISS SELLERS

PD

04/29/2016

Electronic Signature of Signing Officer/Director Detail

Date