

2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000002599

Entity Name: FLORIDA DESIGN CONSULTANTS, INC.**Current Principal Place of Business:**3030 STARKEY BLVD.
NEW PORT RICHEY, FL 34655**Current Mailing Address:**3030 STARKEY BLVD.
NEW PORT RICHEY, FL 34655 US**FEI Number:** 59-3354592**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**MAZUR, KEITH E
3030 STARKEY BLVD
NEW PORT RICHEY, FL 34655 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 PRESIDENT
Name ROGERS, STUART M
Address 3030 STARKEY BLVD.
City-State-Zip: NEW PORT RICHEY FL 34655

Title COO, DIRECTOR, TREASURER
Name MAZUR, KEITH E
Address 3030 STARKEY BLVD.
City-State-Zip: NEW PORT RICHEY FL 34655

Title DIRECTOR
Name MAZUR, EDWARD JR
Address 3030 STARKEY BLVD.
City-State-Zip: NEW PORT RICHEY FL 34655

Title SECRETARY, DIRECTOR, VP
Name WRIGHT, ROBERT CJR.
Address 3030 STARKEY BLVD.
City-State-Zip: NEW PORT RICHEY FL 34655

Title VP
Name CARBALLA, MICHAEL J
Address 3030 STARKEY BLVD.
City-State-Zip: NEW PORT RICHEY FL 34655

Title SVP
Name BELLUCCIA, ALFONSO A
Address 3030 STARKEY BLVD.
City-State-Zip: NEW PORT RICHEY FL 34655

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: KEITH MAZUR

COO

01/09/2014

Electronic Signature of Signing Officer/Director Detail

Date