

**2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P97000034821

**Entity Name:** VALENTI FLORIDA REALTY, INC.

**FILED**  
**Apr 29, 2015**  
**Secretary of State**  
**CC5264584305**

**Current Principal Place of Business:**

3450 BUSCHWOOD PARK DR  
SUITE 195  
TAMPA, FL 33618

**Current Mailing Address:**

3450 BUSCHWOOD PARK DR  
SUITE 195  
TAMPA, FL 33618

**FEI Number: 59-3442367**

**Certificate of Status Desired: No**

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

NESBITT, STEVEN M  
3450 BUSCHWOOD PARK DR  
SUITE 195  
TAMPA, FL 33618 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 OFCR  
Name VALENTI, DARRELL J  
Address 3450 BUSCHWOOD PARK DR, SUITE 195  
City-State-Zip: TAMPA FL 33618

Title OFCR  
Name NESBITT, STEVEN M  
Address 3450 BUSCHWOOD PARK DR, SUITE 195  
City-State-Zip: TAMPA FL 33618

Title OFCR  
Name GRANT, PETER J  
Address 1775 MORIAH WOODS BLVD SUITE 5  
City-State-Zip: MEMPHIS TN 38117

*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: STEVEN M NESBITT**

**CFO**

**04/29/2015**

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

\_\_\_\_\_  
Date