## 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: THEODORE M. BARANOWSKI

Electronic Signature of Signing Officer/Director Detail

# 2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V28118

Entity Name: BARANOWSKI & ASSOCIATES, INC.

#### **Current Principal Place of Business:**

6093 CROSSBOW LANE PORT ORANGE, FL 32128

#### **Current Mailing Address:**

6093 CROSSBOW LANE PORT ORANGE. FL 32128 US

### FEI Number: 59-3121878

# Name and Address of Current Registered Agent:

Electronic Signature of Registered Agent

BARANOWSKI, THEODORE 6093 CROSSBOW LANE PORT ORANGE, FL 32128 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:

Address

Officer/Director Detail :			
Title	DVT	Title	DPS
Name	BARANOWSKI, THEODORE MVICE PR	Name	BARANOWSKI, DOROTHY EPRESIDE

6093 CROSSBOW LANE Address 6093 CROSSBOW LANE PORT ORANGE FL 32128 City-State-Zip: PORT ORANGE FL 32128 City-State-Zip:

Certificate of Status Desired: No

FILED Apr 28, 2014 Secretary of State CC2844043537

Date

04/28/2014 Date

VICE PRESIDENT