## 2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V65151

Entity Name: THE COMMODORE SALES & RENTAL CORPORATION

FILED
Jan 09, 2015
Secretary of State
CC2979936384

Date

Date

**Current Principal Place of Business:** 

4715 THOMAS DRIVE

PANAMA CITY BEACH, FL 32408

**Current Mailing Address:** 

4715 THOMAS DRIVE

PANAMA CITY BEACH, FL 32408 US

FEI Number: 59-3145257 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

WALLS, LYNN S 4715 THOMAS DRIVE PANAMA CITY BEACH, FL 32408 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: LYNN S. WALLS 01/09/2015

Electronic Signature of Registered Agent

Officer/Director Detail:

Title P Title VP

Name EZELL, GEORGETTE Name DAVIS, LELAND

Address 4715 THOMAS DRIVE UNIT 501 Address 4715 THOMAS DR 1007

City-State-Zip: PANAMA CITY BEACH FL 32413 City-State-Zip: PANAMA CITY FL 32408

Title T Title D

NameMEADOR, DOUGNameZITNIK, SHARONAddress4715 THOMAS DR 709Address25782 MADDENCity-State-Zip:PANAMA CITY FL 32408City-State-Zip:TAYLOR MI 48180

Title D Title DIRECTOR

Name KING, GEORGE Name THOMAS, NANCY

Address 160 FORTVILLE RD. Address 4715 THOMAS DRIVE UNIT 406

City-State-Zip: GRAY GA 31032 City-State-Zip: PANAMA CITY BEACH FL 32408

Title DIRECTOR
Name ADAMS, BILL

Address 4715 THOMAS DRIVE #608

City-State-Zip: PANAMA CITY BEACH FL 32408

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: LYNN S. WALLS REGISTERED AGENT 01/09/2015

Electronic Signature of Signing Officer/Director Detail