

**2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N08000002546

**Entity Name:** CCES PTO, INC.

**Current Principal Place of Business:**

5080 SW 92ND AVE.  
COOPER CITY, FL 33328

**Current Mailing Address:**

5080 SW 92ND AVE.  
COOPER CITY, FL 33328

**FEI Number:** 26-3108701

**Certificate of Status Desired:** No

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

ARGUINZONI, JENNY  
5080 SW 92ND AVE.  
COOPER CITY, FL 33328 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:** JENNY ARGUINZONI

04/26/2018

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title           TREASURER  
Name           TORRES, KAREN  
Address        5080 SW 92ND AVE.  
City-State-Zip: COOPER CITY FL 33328

Title           PRESIDENT  
Name           SELVAGGIO-PORRO, MARLEA  
Address        5080 SW 92ND AVE.  
City-State-Zip: COOPER CITY FL 33328

Title           SECRETARY  
Name           ARGUINZONI, JENNY  
Address        5080 SW 92ND AVE.  
City-State-Zip: COOPER CITY FL 33328

Title           VP  
Name           ACANDA, MELANIE  
Address        5080 SW 92ND AVENUE  
City-State-Zip: COOPER CITY FL 33328

Title           VP  
Name           SERVENTI, VALERIA  
Address        5080 SW 92ND AVENUE  
City-State-Zip: COOPER CITY FL 33328

Title           PARLIAMENTARIAN  
Name           ARANA, TAMMY  
Address        5080 SW 92ND AVENUE  
City-State-Zip: COOPER CITY FL 33328

*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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** JENNY ARGUINZONI

**SECRETARY**

04/26/2018

Electronic Signature of Signing Officer/Director Detail

Date