2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N15000011910

Entity Name: TWISTED SISTA'S CORP

Current Principal Place of Business:

8522 GULF BLVD APT.37

NAVARRE, FL 32566

Current Mailing Address:

8522 GULF BLVD APT.37

NAVARRE, FL 32566 US

FEI Number: 81-0910252 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GATTO, KELLYJO 8522 GULF BLVD APT.37

NAVARRE, FL 32566 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

FILED Jan 09, 2017

Secretary of State

CC8232326233

Officer/Director Detail:

Title CPD Title VPD

Name GATTO, KELLYJO Name SHACKLEY, AMY

Address 8522 GULF BLVD APT.37 Address 2265 ORION LAKE DRIVE

City-State-Zip: NAVARRE FL 32566 City-State-Zip: NAVARRE FL 32566

Title TD Title D

NameROBERTS, JAMESNameCATYB, MARIANNEAddress8522 GULF BLVD APT.37Address7220 ZOE CIRCLECity-State-Zip:NAVARRE FL 32566City-State-Zip:NAVARRE FL 32566

Title D

Name CHAPMAN-PERILLARD, CHRISTINA

Address 1945 AMHURST COURT
City-State-Zip: NAVARRE FL 32566

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.

PRESIDENT

01/09/2017