

**2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 363440

**Entity Name:** SEMINOLE GARDENS APARTMENT NO 26-E INC.**Current Principal Place of Business:**8330 112TH ST. N.  
SEMINOLE, FL 33772**Current Mailing Address:**8330 112TH ST. N.  
SEMINOLE, FL 33772 US**FEI Number:** 59-1317369**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**PEACOCK, TOMMAY TPRES  
8330 112TH ST. NORTH  
SEMINOLE, FL 33772 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 ASST. SECRETARY, ASST.  
TREASURER  
Name FISHER, DALE  
Address 8330 112TH ST. N.  
City-State-Zip: SEMINOLE FL 33772

Title PRESIDENT  
Name NICHOLS, KATHLEEN  
Address 8330 112TH ST. N.  
City-State-Zip: SEMINOLE FL 33772

Title 1VP  
Name SICKLES, DAVE  
Address 8330 112TH ST. N.  
City-State-Zip: SEMINOLE FL 33772

Title 2VP  
Name COOK, VIRGINIA  
Address 8330 112TH ST. N.  
City-State-Zip: SEMINOLE FL 33772

Title SECRETARY, TREASURER  
Name DALLE, CAROL  
Address 8330 112TH ST. N.  
City-State-Zip: SEMINOLE FL 33772

*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:** KATHLEEN NICHOLS**PRESIDENT****02/16/2016**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date