## 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: ROBERT A. STECHMANN

Electronic Signature of Signing Officer/Director Detail

# Name and Address of Current Registered Agent:

STECHMANN, ROBERT A. 6807 S HWY A1A MELBOURNE BEACH, FL 32951 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

### Officer/

Title	PD	Title	DIRECTOR
Name	STECHMANN, ROBERT A	Name	STECHMANN, ANN S
Address	P. O. BOX 831297	Address	P. O. BOX 831297
City-State-Zip:	MIAMI FL 33283	City-State-Zip:	MIAMI FL 33283

	Electionic Signature of Registered Agent			
/Director Detail :				
	PD	Title	DIRECTOR	
	STECHMANN, ROBERT A	Name	STECHMANN, ANN S	
	P. O. BOX 831297	Address	P. O. BOX 831297	

Certificate of Status Desired: No

FILED Apr 25, 2018 Secretary of State CC6550300311

2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 372831

Entity Name: FIRST MANAGEMENT COMPANY

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

6807 S HWY A1A MELBOURNE BEACH, FL 32951

### **Current Mailing Address:**

P. O. BOX 831297 MIAMI. FL 33283 US

# FEI Number: 59-1365902

PRESIDENT

04/25/2018

Date

Date