

**2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F15416

**Entity Name:** CHARLES POPPE, INC.

**Current Principal Place of Business:**

7777 LAMESA DRIVE  
BROOKSVILLE, FL 34602

**Current Mailing Address:**

P.O. BOX 10348  
BROOKSVILLE, FL 34603 US

**FEI Number:** 59-2050757

**Certificate of Status Desired:** No

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

POPPE, CHARLES  
7777 LAMESA DRIVE  
BROOKSVILLE, FL 34602 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 PST  
Name POPPE, CHARLES  
Address 7777 LAMESA DRIVE  
City-State-Zip: BROOKSVILLE FL 34602

*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:** CHARLES POPPE

PST

03/08/2015

\_\_\_\_\_ Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_ Date