

**2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# G36694

**Entity Name:** FLORIDA BULLET INCORPORATED

**Current Principal Place of Business:**

1220 ROGERS STREET  
CLEARWATER, FL 33756-5903

**Current Mailing Address:**

1220 ROGERS STREET  
CLEARWATER, FL 33756-5903 US

**FEI Number:** 59-2341725

**Certificate of Status Desired:** Yes

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

FALONE, TOM, III  
1220 ROGERS STREET  
CLEARWATER, FL 33756-5903 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 P  
Name TOM FALONE, III  
Address 1220 ROGERS STREET  
City-State-Zip: CLEARWATER FL 33756-5903

Title VP  
Name FALONE, TOM  
Address 1220 ROGERS STREET  
City-State-Zip: CLEARWATER FL 33756-5903

*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:** TOM FALONE III

**PRESIDENT**

**01/12/2015**

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

\_\_\_\_\_  
Date