## 2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H08400

Entity Name: VIERA REALTY, INC.

**Current Principal Place of Business:** 

7380 MURRELL ROAD SUITE 201 VIERA, FL 32940

**FILED** Jan 03, 2024 **Secretary of State** 8085407118CC

## **Current Mailing Address:**

P.O. BOX 620257

OVIEDO, FL 32762-0257 US

FEI Number: 59-2426773 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

WILSON, BENJAMIN E 7380 MURRELL ROAD SUITE 201 VIERA, FL 32940 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: BENJAMIN E WILSON 01/03/2024

> Electronic Signature of Registered Agent Date

Officer/Director Detail:

VIERA FL 32940

1200 DUDA TRAIL

OVIEDO FL 32765

City-State-Zip:

Address

City-State-Zip:

Title Title

MILLER, JR., CHRISTOPHER S DUDA, SAMUEL D Name Name 7380 MURRELL ROAD, SUITE 201 1200 DUDA TRAIL Address Address City-State-Zip: OVIEDO FL 32765

DVP Title Title ΔΤ

Name MITCHELL, AMY Name CHAPMAN, TRACY D Address 1200 DUDA TRAIL 1200 DUDA TRAIL Address City-State-Zip: OVIEDO FL 32765 City-State-Zip: OVIEDO FL 32765

Title **VPS** Title DVPT

WILSON, BENJAMIN E Name Name WEEKS, JR., PALMER B Address 7380 MURRELL ROAD Address 1200 DUDA TRAIL

SUITE 201

OVIEDO FL 32765 City-State-Zip: City-State-Zip: VIERA FL 32940

Title

AS GAINEY, ANN M Name

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.

01/03/2024 SIGNATURE: TRACY DUDA CHAPMAN **VP**