

2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K28259

**FILED
Mar 23, 2017
Secretary of State
CC2602055326**

Entity Name: FONTAINE & SONS REIMBURSEMENT CONSULTANTS, INC.

Current Principal Place of Business:

1225 S. ELLIS RD
JACKSONVILLE, FL 32205

Current Mailing Address:

1225 S. ELLIS RD
JACKSONVILLE, FL 32205 US

FEI Number: 59-2904169

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

FONTAINE, WILLIAM E., JR.
1225 SOUTH ELLIS RD
JACKSONVILLE, FL 32205 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 D
Name FONTAINE, WILLIAM EA JR.
Address 1225 S. ELLIS RD
City-State-Zip: JACKSONVILLE FL 32205

Title V
Name FONTAINE, REBECCA, L
Address 1225 SOUTH ELLIS RD
City-State-Zip: JACKSONVILLE FL 32205

Title S
Name FONTAINE, WILLIAM, E,III
Address 1225 SOUTH ELLIS RD
City-State-Zip: JACKSONVILLE FL 32205

Title T
Name FONTAINE, T, RYAN
Address 1225 SOUTH ELLIS RD
City-State-Zip: JACKSONVILLE FL 32205

Title S
Name FONTAINE, JUSTIN, L
Address 1225 SOUTH ELLIS RD
City-State-Zip: JACKSONVILLE FL 32205

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: WILLIAM E FONTAINE, JR.

PRESIDENT

03/23/2017

Electronic Signature of Signing Officer/Director Detail

Date