

2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000041235

Entity Name: SHERYL S. ZUST, P.A.

Current Principal Place of Business:

4649 S. CLYDE MORRIS BLVD.
SUITE 610
PORT ORANGE, FL 32129

Current Mailing Address:

4649 S. CLYDE MORRIS BLVD.
SUITE 610
PORT ORANGE, FL 32129

FEI Number: 59-3640444

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ZUST, SHERYL S
4649 CLYDE MORRIS BLVD, STE 610
SUITE 610
PORT ORANGE, FL 32129 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 PD
Name ZUST, SHERYL S
Address 4649 S. CLYDE MORRIS BLVD
City-State-Zip: PORT ORANGE FL 32129

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: SHERYL S. ZUST

PRESIDENT

03/17/2017

Electronic Signature of Signing Officer/Director Detail

Date