

**2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P00000116245

**Entity Name:** PEGGY MALONE & ASSOCIATES, INC.

**Current Principal Place of Business:**

3653 REGENT BLVD STE 409  
JACKSONVILLE, FL 32224

**Current Mailing Address:**

14286 BEACH BOULEVARD  
SUITE 19-345  
JACKSONVILLE, FL 32250 US

**FEI Number:** 59-3689184

**Certificate of Status Desired:** No

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

COLEMAN, C. RANDOLPH  
9250 BAYMEADOWS RD STE 450  
JACKSONVILLE, FL 32256 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 MALONE, PEGGY CLAIR  
Address 14286 BEACH BLVD STE 19-345  
City-State-Zip: JACKSONVILLE BEACH FL 32250

Title VP  
Name SIMPSON, MICHAEL R  
Address 14286 BEACH BLVD STE 19-345  
City-State-Zip: JACKSONVILLE BEACH FL 32250

Title VP  
Name SIMPSON, JANETTE D  
Address 14286 BEACH BLVD. STE. 19-345  
City-State-Zip: JACKSONVILLE FL 32250

*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:** JANETTE SIMPSON

**VICE PRESIDENT**

**01/20/2014**

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

\_\_\_\_\_  
Date