

2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000005368

Entity Name: JOHN C. GOEDE, P.A.

Current Principal Place of Business:

8950 FONTANA DEL SOL WAY
SUITE 100
NAPLES, FL 34109

Current Mailing Address:

P.O. BOX 111024
NAPLES, FL 34108

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GOEDE, JOHN CESQ.
8950 FONTANA DEL SOL WAY
SUITE 100
NAPLES, FL 34109 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 GOEDE, JOHN C
Address 8950 FONTANA DEL SOL WAY
City-State-Zip: SUITE 100 FL 34109

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: JOHN C GOEDE

PD

04/21/2014

_____ Electronic Signature of Signing Officer/Director Detail

_____ Date