

2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000028406

Entity Name: DONNA M LAFLAMME INC

Current Principal Place of Business:

368 FOUR SEASONS
PALM BCH GARDENS, FL 33420

Current Mailing Address:

P. O. BOX 33693
PALM BCH GARDENS, FL 33420

FEI Number: 02-0562375

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LA FLAMME, DONNA M
368 FOUR SEASONS
PALM BCH GARDENS, FL 33420 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 PSD
Name LA FLAMME, DONNA M
Address P. O. BOX 33693
City-State-Zip: PALM BCH GARDENS FL 33420

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: DONNA LAFLAMME

PRESIDENT

01/25/2016

Electronic Signature of Signing Officer/Director Detail

Date