## 2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000008013

Entity Name: ROGUE WAVE, INC.

**Current Principal Place of Business:** 

300 5TH AVE. SOUTH, STE. 410

NAPLES, FL 34102

**Current Mailing Address:** 

300 5TH AVE. SOUTH, STE. 410

NAPLES, FL 34102

FEI Number: 14-1867818 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

WOLFF, JOHN 300 5TH AVE. SOUTH, STE. 410 NAPLES, FL 34102 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

FILED Jan 09, 2015

**Secretary of State** 

CC1419308333

Officer/Director Detail:

SIGNATURE: JOHN WOLFF

Title D Title

Name WOLFF, JOHN Name THORNE, NANCY

Address 300 5TH AVE. SOUTH, STE. 410 Address 300 5TH AVE. SOUTH, STE. 410

City-State-Zip: NAPLES FL 34102 City-State-Zip: NAPLES FL 34102

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.

**PRESIDENT**