

**2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P03000049889

**Entity Name:** KATHLEEN A. LIEBERMAN, P.A.

**Current Principal Place of Business:**

122 SHELL FALLS DRIVE  
APOLLO BEACH, FL 33578

**Current Mailing Address:**

122 SHELL FALLS DR  
APOLLO BEACH, FL 33572 US

**FEI Number:** 06-1693578

**Certificate of Status Desired:** No

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

LIEBERMAN, KATHLEEN A  
122 SHELL FALLS DRIVE  
APOLLO BEACH, FL 33572 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           PTD  
Name           LIEBERMAN, KATHLEEN A  
Address        2020 W. BRANDON BLVD.  
                  145  
City-State-Zip: BRANDON FL 33511

Title           VSD  
Name           LIEBERMAN, STEVEN S  
Address        2020 W. BRANDON BLVD.  
                  145  
City-State-Zip: BRANDON FL 33511

*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:** KATHLEEN A LIEBERMAN

**PRESIDENT**

**04/20/2018**

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

\_\_\_\_\_  
Date