

**2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P04000048868

**Entity Name:** CAROLYN DALE, P.A.

**Current Principal Place of Business:**

5534 COASTAL LANE N  
JACKSONVILLE, FL 32256

**Current Mailing Address:**

5534 COASTAL LANE N  
JACKSONVILLE, FL 32256

**FEI Number:** 04-3789062

**Certificate of Status Desired:** No

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

HUTCHENS, JR., JAMES GCPA  
106 CANAL BLVD STE B  
PONTE VEDRA BCH, FL 32082 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 DP  
Name DALE, CAROLYN  
Address 5534 COASTAL LANE N  
City-State-Zip: JACKSONVILLE FL 32256

*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:** CAROLYN DALE

**PRESIDENT**

**05/01/2017**

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

\_\_\_\_\_  
Date