

**2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P04000172337

**Entity Name:** A & E ACCOUNTING, INC.

**Current Principal Place of Business:**

2938 SEAN RD  
NORTH PORT, FL 34288

**Current Mailing Address:**

2938 SEAN RD  
NORTH PORT, FL 34288

**FEI Number:** 20-2065271

**Certificate of Status Desired:** No

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

LAVIGNE, ANTOINETTE  
2938 SEAN RD  
NORTH PORT, FL 34288 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 P  
Name KISTLER, ELAINE  
Address 1284 JABARA AVE  
City-State-Zip: NORTH PORT FL 34288

Title VP  
Name LAVIGNE, ANTOINETTE  
Address 2938 SEAN RD  
City-State-Zip: NORTH PORT FL 34288

Title D  
Name KISTLER, TOM  
Address 1284 JABARA AVE  
City-State-Zip: NORTH PORT FL 34288

Title ST  
Name LAVIGNE, JEREMY  
Address 2938 SEAN RD  
City-State-Zip: NORTH PORT FL 34288

*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:** ANTOINETTE LAVIGNE

VP

04/26/2015

Electronic Signature of Signing Officer/Director Detail

Date