

**2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P05000011024

**Entity Name:** SHIRLEY M. BENNETT, P.A.

**Current Principal Place of Business:**

815 KALLI CREEK LANE  
ST. AUGUSTINE, FL 32080

**Current Mailing Address:**

815 KALLI CREEK LANE  
ST. AUGUSTINE, FL 32080

**FEI Number:** 43-2072614

**Certificate of Status Desired:** No

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

BENNETT, SHIRLEY M  
815 KALLI CREEK LANE  
ST. AUGUSTINE, FL 32080 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 PD  
Name BENNETT, SHIRLEY M  
Address 815 KALLI CREEK LANE  
City-State-Zip: ST. AUGUSTINE FL 32080

*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:** SHIRLEY M. BENNETT

01/20/2014

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

\_\_\_\_\_ Date