

**2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P05000057468

**Entity Name:** NANCY A PAYETTE PA

**Current Principal Place of Business:**

C/O NANCY A PAYETTE  
2701 SE KING ARTHURS CT  
PORT ST LUCIE, FL 34952

**Current Mailing Address:**

C/O NANCY A PAYETTE  
2701 SE KING ARTHURS CT  
PORT ST LUCIE, FL 34952 US

**FEI Number:** 20-2656215

**Certificate of Status Desired:** No

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

PAYETTE, NANCY A  
2701 SE KING ARTHURS CT  
PORT ST LUCIE, FL 34952 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 D  
Name PAYETTE, NANCY A  
Address 2701 SE KING ARTHURS CT  
City-State-Zip: PORT ST LUCIE FL 34952

*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:** NANCY A PAYETTE

**DIRECTOR/OFFICER/AGE** 04/03/2015  
NT

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

\_\_\_\_\_ Date