

**2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P05000068499

**Entity Name:** MARIANNE WINDRIDGE P.A.

**Current Principal Place of Business:**

32801 HWY 441 N.  
#57  
OKEECHOBEE, FL 34972

**Current Mailing Address:**

32801 HWY 441 N.  
#57  
OKEECHOBEE, FL 34972

**FEI Number:** 90-0230580

**Certificate of Status Desired:** No

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

SULTAN, LOUIS  
32801 US HWY 441 N.  
OKEECHOBEE, FL 34972 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            PRES  
Name            WINDRIDGE, MARIANNE W  
Address        32801 US HWY 441 N. #57  
City-State-Zip: OKEECHOBEE FL 34972

*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:** MARIANNE WINDRIDGE

**PRES.**

**02/26/2014**

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

\_\_\_\_\_  
Date