

**2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P07000076907

**Entity Name:** CORINE'S 24/7 BAIL BONDS, INC.

**Current Principal Place of Business:**

1269 EDGEWOOD AVE W  
JACKSONVILLE, FL 32208

**Current Mailing Address:**

1800 CORPORATE SQUARE BLVD  
317  
JACKSONVILLE, FL 32216 US

**FEI Number:** 65-1311490

**Certificate of Status Desired:** No

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

MOORE, CORINE  
1800 CORPORATE SQUARE BLVD  
317  
JACKSONVILLE, FL 32216 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 MOORE, CORINE  
Address 1800 CORPORATE SQUARE BLVD  
317  
City-State-Zip: JACKSONVILLE FL 32216

*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:** CORINE MOORE

**OWNER**

**04/28/2017**

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

\_\_\_\_\_  
Date