# Entity Name: COMMERCIAL REAL ESTATE SOLUTIONS OF JACKSONVILLE, INC.

2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

## **Current Principal Place of Business:**

514 CHAFFEE POINT BOULEVARD, SUITE 1 JACKSONVILLE, FL 32221

DOCUMENT# P08000017330

## **Current Mailing Address:**

514 CHAFFEE POINT BOULEVARD, SUITE 1 JACKSONVILLE, FL 32221 US

## FEI Number: 26-2048139

### Name and Address of Current Registered Agent:

TYRE, WARREN A 514 CHAFFEE POINT BOULEVARD, SUITE 1 JACKSONVILLE, FL 32221 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

### **Officer/Director Detail :**

Title	DP	Title	DVPS
Name	DANIELS, LINDA L	Name	TYRE, WARREN A
Address	7350 STATE RD 13 NORTH	Address	1431 RIVERPLACE BLVD UNIT 2708
City-State-Zip:	ST AUGUSTINE FL 32092	City-State-Zip:	JACKSONVILLE FL 32207

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.

PRESIDENT

### SIGNATURE: LINDA L. DANIELS

Electronic Signature of Signing Officer/Director Detail

Certificate of Status Desired: Yes

02/26/2015

Date

Date