## 2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000082415

Entity Name: RAMCO PROTECTIVE OF ORLANDO, INC.

INC

FILED Mar 30, 2015 Secretary of State CC9309144916

# **Current Principal Place of Business:**

401 CENTER POINTE CIR SUITE 1527

ALTAMONTE SPRINGS, FL 32701

# **Current Mailing Address:**

401 CENTER POINTE CIR SUITE 1527

ALTAMONTE SPRINGS, FL 32701

FEI Number: 26-3803223 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

MOFFA, JOSEPH ONE FINANCIAL PLAZA 2202

FORT LAUDERDALE, FL 33394 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 Title VI

Name DEPOY, TRINA M Name WALFISH, ADAM

Address ONE FINANCIAL PLAZA SUITE # 2202 Address 1909 SUNSET PALM DRIVE

City-State-Zip: FORT LAUDERDALE FL 33394 City-State-Zip: APOPKA FL 32712

Title PD

Name NEGRI, COREY

Address ONE FINANCIAL PLAZA SUITE # 2202

City-State-Zip: FORT LAUDERDALE FL 33394

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: ADAM WALFISH VP

Electronic Signature of Signing Officer/Director Detail

03/30/2015