#### 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: BRUCE H. KAUFFMAN

Electronic Signature of Signing Officer/Director Detail

# **Current Principal Place of Business:**

698 NORTH MAITLAND AVENUE SUITE 200 MAITLAND, FL 32751

DOCUMENT# P09000018974

#### **Current Mailing Address:**

698 NORTH MAITLAND AVENUE SUITE 200 MAITLAND, FL 32751 US

#### FEI Number: 26-2520141

### Name and Address of Current Registered Agent:

KAUFFMAN, BRUCE H 4214 BELL TOWER COURT BELLE ISLE, FL 32812 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 D KAUFFMAN, BRUCE H Name 4214 BELL TOWER COURT Address City-State-Zip: BELLE ISLE FL 32812

Certificate of Status Desired: No

FILED Jan 15, 2016 Secretary of State CC4446422651

Date

01/15/2016

DIRECTOR

Date

## 2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT

Entity Name: THE LAW OFFICE OF BRUCE H. KAUFFMAN, P.A.