## 2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10000004316

Entity Name: TRADEWINDS RESORT SPECIALISTS CENTRAL FLORIDA,

INC.

Feb 09, 2016 Secretary of State CC6896672350

**FILED** 

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

6019 SOUTH ORANGE AVENUE ORLANDO, FL 32809

# **Current Mailing Address:**

6019 SOUTH ORANGE AVENUE ORLANDO, FL 32809 US

FEI Number: 27-1697019 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

CROTTY, PETER 6019 SOUTH ORANGE AVENUE, ORLANDO, FL 32809 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 PVST Title D

Name CROTTY, PETER Name CROTTY, PETER

Address 6019 SOUTH ORANGE AVENUE Address 6019 SOUTH ORANGE AVENUE

City-State-Zip: ORLANDO FL 32809 City-State-Zip: ORLANDO FL 32809

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.