

**2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P10000009569

**Entity Name:** CHRISTINE ERRICO INC.

**Current Principal Place of Business:**

3354 EVERHIGH ACRES ROAD  
CLEWISTON, FL 33440

**Current Mailing Address:**

505 W. HICKPOOCHEE AVE.  
SUITE 200  
LABELLE, FL 33935

**FEI Number:** 27-1764488

**Certificate of Status Desired:** No

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

ERRICO, CHRISTINE  
505 W. HICKPOOCHEE AVE.  
SUITE 200  
LABELLE, FL 33935 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 PSD  
Name ERRICO, CHRISTINE  
Address 505 W. HICKPOOCHEE AVE. STE 200  
City-State-Zip: LABELLE FL 33935

*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:** CHRISTINE ERRICO

**OFFICER**

**04/30/2013**

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

\_\_\_\_\_  
Date