

**2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P10000028921

**Entity Name:** CHRISTA BROOKS PA

**Current Principal Place of Business:**

1101 SE 4TH TERRACE  
CAPE CORAL, FL 33990

**Current Mailing Address:**

1101 SE 4TH TERRACE  
CAPE CORAL, FL 33990

**FEI Number:** 27-2204161

**Certificate of Status Desired:** No

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

SWAN, LAWRENCE  
709 CAPE CORAL PARKWAY WEST  
CAPE CORAL, FL 33914 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 DPVS  
Name BROOKS, CHRISTA  
Address 1101 SE 4TH TERRACE  
City-State-Zip: CAPE CORAL FL 33990

Title T  
Name BROOKS, CHRISTA  
Address 1101 SE 4TH TERRACE  
City-State-Zip: CAPE CORAL FL 33990

*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:** CHRISTA BROOKS

**PRESIDENT**

**01/21/2016**

Electronic Signature of Signing Officer/Director Detail

Date