

**2021 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P11000049419

**Entity Name:** VALERIE ACREE P.A.

**Current Principal Place of Business:**

12300 5TH ST E  
TREASURE ISLAND, FL 33706

**Current Mailing Address:**

12300 5TH ST E  
TREASURE ISLAND, FL 33706 US

**FEI Number:** 45-2444954

**Certificate of Status Desired:** No

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

ACREE, VALERIE  
12300 5TH ST E  
TREASURE ISLAND, FL 33706 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 P, T  
Name ACREE, VALERIE  
Address 12300 5TH ST E  
City-State-Zip: TREASURE ISLAND FL 33706

Title PRESIDENT  
Name ACREE, VALERIE F  
Address 12300 5TH ST E  
City-State-Zip: TREASURE ISLAND FL 33706

*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:** VALERIE ACREE

**PRESIDENT**

**03/15/2021**

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

\_\_\_\_\_  
Date