

**2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P12000064224

**Entity Name:** AS INDEPENDENCE, INC.

**Current Principal Place of Business:**

1950 LORRAINE WAY  
SAINT CLOUD, FL 34769

**Current Mailing Address:**

1950 LORRAINE WAY  
SAINT CLOUD, FL 34769

**FEI Number:** 46-0675799

**Certificate of Status Desired:** No

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

MARTELLI, EMILY  
3855 AVALON PARK BLVD E.  
ORLANDO, FL 32828 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, S  
Name SMITH, ANTOINETTE  
Address 1950 LORRAINE WAY  
City-State-Zip: SAINT CLOUD FL 34769

Title T  
Name SMITH, ANOINETTE  
Address 1950 LORRAINE WAY  
City-State-Zip: SAINT CLOUD FL 34769

*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:** ANTOINETTE SMITH

**PRESIDENT**

**01/05/2015**

Electronic Signature of Signing Officer/Director Detail

Date