

**2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P13000006479

**Entity Name:** 5415, INC.

**Current Principal Place of Business:**

6915 STATE ROAD 54  
NEW PORT RICHEY, FL 34653

**Current Mailing Address:**

6915 STATE ROAD 54  
NEW PORT RICHEY, FL 34653 US

**FEI Number:** 46-1941923

**Certificate of Status Desired:** No

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

BLACKWELL, GARY L  
6915 STATE ROAD 54  
NEW PORT RICHEY, FL 34653 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:** GARY L BLACKWELL

03/09/2016

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title D, P  
Name BLACKWELL, GARY L  
Address 6915 STATE ROAD 54  
City-State-Zip: NEW PORT RICHEY FL 34653

Title D, VP  
Name BLACKWELL, II, GARY L  
Address 6915 STATE ROAD 54  
City-State-Zip: NEW PORT RICHEY FL 34653

Title S, T  
Name OLSON, JACQUELINE L  
Address 6915 STATE ROAD 54  
City-State-Zip: NEW PORT RICHEY FL 34653

Title ASST. SECRETARY  
Name HUDSON, JOHN E  
Address P.O. BOX 2108  
City-State-Zip: ELFERS FL 34680

*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:** GARY L BLACKWELL

**PRESIDENT**

03/09/2016

Electronic Signature of Signing Officer/Director Detail

Date