

2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P13000035581

Entity Name: MARLENE NICKELSON FROST, INC

Current Principal Place of Business:

19 N WOLFF STREET
FERNANDINA BEACH, FL 32034

Current Mailing Address:

PO BOX 16704
FERNANDINA BEACH, FL 32035 US

FEI Number: 46-2587019

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

FROST, MARLENE N
19 N WOLFF ST
FERNANDINA BEACH, FL 32034 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
Name FROST, MARLENE N
Address 19 N WOLFF ST
City-State-Zip: FERNANDINA BEACH FL 32034

Title TRES
Name FROST, JAMES L JR
Address 19 N WOLFF STREET
City-State-Zip: FERNANDINA BEACH FL 32034

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: MARLENE N. FROST

PRESIDENT

02/13/2014

Electronic Signature of Signing Officer/Director Detail

Date