## 2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P13000051187

Entity Name: BARBARA ANNA MEI, PA

**Current Principal Place of Business:** 

990 BOULEVARD OF THE ARTS

**APT 1203** 

SARASOTA, FL 34236

**Current Mailing Address:** 

990 BOULEVARD OF THE ARTS

**APT 1203** 

SARASOTA, FL 34236 US

**FEI Number: NOT APPLICABLE** Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

MEI, BARBARA A 990 BLVD OF THE ARTS APT 1203 SARASOTA, FL 34236 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

**FILED** Mar 30, 2016

**Secretary of State** 

CC0822287009

Officer/Director Detail:

Title Title **SECRETARY** 

MEI. BARBARA A Name Name MEI. BARBARA A

Address 990 BOULEVARD OF THE ARTS APT Address 990 BOULEVARD OF THE ARTS 1203

APT 1203

SARASOTA FL 34236 SARASOTA FL 34236 City-State-Zip: City-State-Zip:

Title **TREASURER** Title **DIRECTOR** 

MEI, BARBARA A Name Name MEI, BARBARA A

990 BOULEVARD OF THE ARTS 990 BOULEVARD OF THE ARTS Address Address

**APT 1203 APT 1203** 

City-State-Zip: SARASOTA FL 34236 SARASOTA FL 34236 City-State-Zip:

Title CFO

MEI, BARBARA A Name

990 BOULEVARD OF THE ARTS Address

APT 1203

SARASOTA FL 34236 City-State-Zip:

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: BARBARA ANNA MEI

**PRESIDENT** 

03/30/2016