

**2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P14000006210

**Entity Name:** HEATHER MALEY, CPA, PA

**Current Principal Place of Business:**

4827 ACK SLOAN TRAIL  
MACCLENNY, FL 32063

**Current Mailing Address:**

PO BOX 1563  
MACCLENNY, FL 32063 US

**FEI Number:** 46-4581955

**Certificate of Status Desired:** No

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

MALEY, HEATHER  
4827 ACK SLOAN TRAIL  
MACCLENNY, FL 32063 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 MALEY, HEATHER  
Address PO BOX 1563  
City-State-Zip: MACCLENNY FL 32063

*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:** HEATHER MALEY

**OWNER**

**05/01/2015**

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

\_\_\_\_\_  
Date