## 2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P14000040722

Entity Name: MRS. CLAUS WORKSHOP, INC.

**Current Principal Place of Business:** 

6938 W LINEBAUGH AVENUE SUITE 102

TAMPA, FL 33625

## **Current Mailing Address:**

6938 W LINEBAUGH AVENUE SUITE 102 TAMPA, FL 33625

FEI Number: 46-5616431 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

ARMS, MELANIE 6938 W LINEBAUGH AVENUE SUITE 102 TAMPA, FL 33625 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 Title VF

Name REESER, JARON Name CARNEY, JAN-MICHAEL

Address 6938 W LINEBAUGH AVENUE, SUITE Address 6938 W LINEBAUGH AVENUE, SUITE

City-State-Zip: TAMPA FL 33625 City-State-Zip: TAMPA FL 33625

Title T

Name ARMS, MELANIE

Address 6938 W LINEBAUGH AVENUE, SUITE

102

City-State-Zip: TAMPA FL 33625

SIGNATURE: MELANIE ARMS

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.

FILED Apr 29, 2015

**Secretary of State** 

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