

**2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P15000049641

**Entity Name:** NANCY ANZALONE, P.A.

**Current Principal Place of Business:**

413 SE 4TH STREET  
DANIA BEACH, FL 33004

**Current Mailing Address:**

P.O. BOX 126  
DANIA BEACH, FL 33004 US

**FEI Number:** 47-4281029

**Certificate of Status Desired:** No

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

ANZALONE, NANCY  
413 SE 4TH STREET  
DANIA BEACH, FL 33004 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            PRES  
Name            ANZALONE, NANCY  
Address        413 SE 4TH STREET  
City-State-Zip: DANIA BEACH FL 33004

Title            VP  
Name            ANZALONE, NANCY  
Address        413 SE 4TH STREET  
City-State-Zip: DANIA FL 33004

Title            TREA  
Name            ANZALONE, NANCY  
Address        413 SE 4TH STREET  
City-State-Zip: DANIA BEACH FL 33004

Title            SEC  
Name            LOMBARDO, LAURA  
Address        413 SE 4TH STREET  
City-State-Zip: DANIA BEACH FL 33004

*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:** NANCY ANZALONE

**PRESIDENT**

**04/26/2018**

Electronic Signature of Signing Officer/Director Detail

Date