

**2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P15000064992

**Entity Name:** SLEEPY PROPERTY MGT. INC

**Current Principal Place of Business:**

10333 EAST GOBBLER DR  
FLORAL CITY, FL 34436

**Current Mailing Address:**

P.O BOX 1148  
HOMOSASSA SPRINGS, FL 34447

**FEI Number:** 47-4697291

**Certificate of Status Desired:** No

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

RUDESTEDT, BIRGIT  
13001 SPRING HILL DR  
SPRING HILL, FL 34609 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 T  
Name PHILLIPS-MCCRAW, MARYBETH  
Address 10333 EAST GOBBLER DR  
City-State-Zip: FLORAL CITY FL 34436

Title VP  
Name THOLUND, BONITA S  
Address 10333 DEEP GOBBLER DR  
City-State-Zip: FLORAL CITY FL 34446

Title P  
Name MATTHEWSON, TROY C  
Address 10333 DEEP GOBBLER DR.  
City-State-Zip: FLORAL CITY FL 34446

*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:** BONITA THOLUND

VP

04/26/2017

Electronic Signature of Signing Officer/Director Detail

Date