

2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P15000086125

Entity Name: BONNIE MARTIENZ, P.A.

Current Principal Place of Business:

493 BLUFF VIEW DR
BELLEAIR BLUFFS, FL 33770

Current Mailing Address:

493 BLUFF VIEW DR
BELLEAIR BLUFFS, FL 33770 US

FEI Number: 47-5351318

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

AMBROSE, PATRICK K
10773 70TH AVE
SEMINOLE, FL 33772 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 PS
Name LANNERS, BONNIE
Address 493 BLUFF VIEW DR
City-State-Zip: BELLEAIR BLUFFS FL 33770

Title T
Name LOWE, ROBERTA
Address 493 BLUFF VIEW DR
City-State-Zip: BELLEAIR BLUFFS FL 33770

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: BONNIE LANNERS

PS

01/12/2018

Electronic Signature of Signing Officer/Director Detail

Date