

2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000063478

Entity Name: PAGE ONE CONSULTANTS, INC.**Current Principal Place of Business:**5780 HOFFNER AVE
STE 401
ORLANDO, FL 32822**Current Mailing Address:**5780 HOFFNER AVE
STE 401
ORLANDO, FL 32822 US**FEI Number:** 59-3195543**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**PAGE, SHERYL MMS.
6 OLD GROVE LANE
ALTAMONTE SPRINGS, FL 32701 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	PAGE, SHERYL M
Address	6 OLD GROVE LANE
City-State-Zip:	ALTAMONTE SPRINGS FL 32701
Title	SENIOR VICE PRESIDENT
Name	FERNANDEZ, SIMON P.E.
Address	10081 LEEVISTA BOULEVARD, UNIT 10109
City-State-Zip:	ORLANDO FL 32829
Title	COO
Name	BOETTGER, MAUREEN
Address	657 ROCKLEDGE DRIVE
City-State-Zip:	ROCKLEDGE FL 32955

Title	COO
Name	DUNHAM, DANIEL P.E.
Address	4389 STEED TERRACE
City-State-Zip:	WINTER PARK FL 32792
Title	VP
Name	SUKANEK, CHARLES P.E.
Address	223 WEST SABAL PALM PLACE
City-State-Zip:	LONGWOOD FL 32779
Title	SECRETARY
Name	ROBERTSON, JUSTINA
Address	2251 KING HENRYS COURT
City-State-Zip:	WINTER PARK FL 32792

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: JUSTINA ROBERTSON**SECRETARY****04/11/2016**_____
Electronic Signature of Signing Officer/Director Detail_____
Date