

2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000009288

Entity Name: CONSULTING MANAGEMENT INSTITUTE, INC.

Current Principal Place of Business:

7551 ORCHID HAMMOCK DR
WEST PALM BEACH, FL 33412

Current Mailing Address:

7551 ORCHID HAMMOCK DR
WEST PALM BEACH, FL 33412 US

FEI Number: 65-0466227

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ESCOTT, JO-ANN
7551 ORCHID HAMMOCK DR.
WEST PALM BEACH, FL 33412 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 D
Name ESCOTT, JO-ANN
Address 7551 ORCHID HAMMOCK DR.
City-State-Zip: WEST PALM BEACH FL 33412

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: JO-ANN ESCOTT

D

01/26/2015

Electronic Signature of Signing Officer/Director Detail

Date