

**2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P94000049816

**Entity Name:** ANALYTICAL LABORATORIES OF FLORIDA, INC.

**Current Principal Place of Business:**

2265 LEASIDE COURT  
MERRITT ISLAND, FL 32952

**Current Mailing Address:**

PO BOX 349  
CAPE CANAVERAL, FL 32920-0349 US

**FEI Number:** 59-3259055

**Certificate of Status Desired:** No

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

SCHAMP, DALE A  
2265 LEASIDE COURT  
MERRITT ISLAND, FL 32952 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 PD  
Name SCHAMP, SUSAN LPRESIDE  
Address 2265 LEASIDE COURT  
City-State-Zip: MERRITT ISLAND FL 32952

Title TREA  
Name SCHAMP, DALE ATREASUR  
Address 2265 LEASIDE COURT  
City-State-Zip: MERRITT ISLAND FL 32952

*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:** DALE ALAN SCHAMP

**TREASURER**

**01/10/2017**

Electronic Signature of Signing Officer/Director Detail

Date