

2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000031240

Entity Name: CAROLYN M. BURKE, P.A.

Current Principal Place of Business:

3571 LONE WOLF TRL
SAINT AUGUSTINE, FL 32086

Current Mailing Address:

3571 LONE WOLF TRL
SAINT AUGUSTINE, FL 32086 US

FEI Number: 65-0573935

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BURKE, CAROLYN M
3571 LONE WOLF TRL.
SAINT AUGUSTINE, FL 32086 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 BURKE, CAROLYN M
Address 3571 LONE WOLF TRL
City-State-Zip: SAINT AUGUSTINE FL 32086

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: CAROLYN M. BURKE

PRESIDENT

03/04/2015

_____ Electronic Signature of Signing Officer/Director Detail

_____ Date