

**2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P95000056405

**Entity Name:** CLEMONS AND PIERCE, INC.

**Current Principal Place of Business:**

560 HARRISON AVE.  
PANAMA CITY, FL 34201

**Current Mailing Address:**

P.O. BOX 2298  
PANAMA CITY, FL 32402 US

**FEI Number:** 59-3332202

**Certificate of Status Desired:** No

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

BRYANT, ROWLETT EESQUIRE  
833 HARRISON AVENUE  
PANAMA CITY, FL 32401 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 ASS STI  
Name CLEMONS, GIRARD LJR  
Address 560 HARRISON AVE.  
City-State-Zip: PANAMA CITY FL 34201

Title PD  
Name CLEMONS, ROSS  
Address 560 HARRISON AVE.  
City-State-Zip: PANAMA CITY FL 34201

Title VPD  
Name PIERCE, LAURIE  
Address 560 HARRISON AVE.  
City-State-Zip: PANAMA CITY FL 34201

Title STD  
Name CLEMONS, SCOTT  
Address 560 HARRISON AVE.  
City-State-Zip: PANAMA CITY FL 34201

*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:** ROSS CLEMONS

**PRESIDENT**

**01/12/2017**

Electronic Signature of Signing Officer/Director Detail

Date