## 2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000097973

Entity Name: VAN CURA & ASSOCIATES, INC.

**Current Principal Place of Business:** 

195 S. WESTMONTE DR. SUITE 1130

ALTAMONTE SPRINGS, FL 32714

**Current Mailing Address:** 

509 W. WEKIVA COVE RD. LONGWOOD, FL 32779 US

FEI Number: 59-3351944 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

VANCURA, WILLIAM P 509 WEKIVA COVE ROAD LONGWOOD, FL 32779 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

**FILED** Apr 07, 2016

**Secretary of State** 

CC1651942761

Officer/Director Detail:

Title

Name VANCURA, WILLIAM P Address 509 WEKIVA COVE ROAD City-State-Zip: LONGWOOD FL 32779

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: WILLIAM P. VANCURA

**PRESIDENT** 

04/07/2016