

2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000036078

Entity Name: SPIC FINANCIAL CORPORATION**Current Principal Place of Business:**4500 NW 27TH AVENUE
BUILDING C-2
GAINESVILLE, FL 32606**Current Mailing Address:**4500 NW 27TH AVENUE
BUILDING C-2
GAINESVILLE, FL 32606 US**FEI Number:** 59-3454493**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**WILSON, ROBERT J
4500 NW 27TH AVENUE
BUILDING C=2
GAINESVILLE, FL 32606 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	CD
Name	PARRILLO, WILLIAM J
Address	40 BAYBROOK LANE
City-State-Zip:	OAKBROOK IL 60521

Title	VD
Name	PARRILLO, WILLIAM G
Address	735 SOUTH ADAMS
City-State-Zip:	HINSDALE IL 60521

Title	V
Name	O'BOYLE, ROBERT J
Address	1437 SW 90TH STREET
City-State-Zip:	GAINESVILLE FL 32607

Title	PD
Name	BORDEMAN, ROBERT M
Address	811 WEST HICKORY
City-State-Zip:	HINSDALE IL 60521

Title	T
Name	KIMMELL, JOSHUA N
Address	1016 NW 87TH WAY
City-State-Zip:	GAINESVILLE FL 32606

Title	V
Name	WILSON, ROBERT J
Address	5408 SW 131ST LANE
City-State-Zip:	MICANOPY FL 32667

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: ROBERT J. WILSON

VICE PRESIDENT

04/24/2014

Electronic Signature of Signing Officer/Director Detail_____
Date