

**2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P97000086499

**Entity Name:** GREGORY N. BURNS, P.A.

**Current Principal Place of Business:**

2709 SWAMP CABBAGE COURT  
#202  
FORT MYERS, FL 33901

**Current Mailing Address:**

PO BOX 2194  
FT MYERS, FL 33902

**FEI Number: 65-0790652**

**Certificate of Status Desired: No**

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

BURNS, GREGORY N  
2709 SWAMP CABBAGE COURT  
FORT MYERS, FL 33901 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            PVT  
Name            BURNS, GREGORY N  
Address        2709 SWAM CABBAGE COURT  
City-State-Zip: FT MYERS FL 33901

Title            SD  
Name            BURNS, GREGORY N  
Address        2709 SWAMP CABBAGE COURT  
City-State-Zip: FT MYERS FL 33901

*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: GREGORY N. BURNS**

**PRESIDENT**

**03/27/2017**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date