

**2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P99000058605

**Entity Name:** 336 PARTNERS, INC

**Current Principal Place of Business:**

336 S. COUNTY RD.  
PALM BEACH, FL 33480

**Current Mailing Address:**

336 S. COUNTY RD.  
PALM BEACH, FL 33480

**FEI Number:** 65-0928873

**Certificate of Status Desired:** No

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

ORRICO, CASSANDRA M  
336 S. COUNTY RD.  
PALM BEACH, FL 33480 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 P  
Name ORRICO, CASSANDRA M  
Address 336 S COUNTY RD  
City-State-Zip: PALM BEACH FL 33480

Title VP  
Name ORRICO, KATHLEEN  
Address 2128 VISTA DR  
City-State-Zip: JUNO FL 33408

Title S  
Name ORRICO, COLLEEN MJR  
Address 336 S COUNTY RD  
City-State-Zip: PALM BEACH FL 33480

*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:** CASSANDRA M ORRICO

P

04/14/2016

Electronic Signature of Signing Officer/Director Detail

Date