# 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: BRENDA D. MONTGOMERY

Electronic Signature of Signing Officer/Director Detail

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:

**Officer/Director Detail :** Title D Title D MONTGOMERY, TIMOTHY L MONTGOMERY, BRENDA D. Name Name 27457 SENATOR DR Address 27457 SENATOR DRIVE Address City-State-Zip: PUNTA GORDA FL 33955 City-State-Zip: PUNTA GORDA FL 33955

# 2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S49919

Entity Name: CITE ENTERPRISE, INC.

### **Current Principal Place of Business:**

27457 SENATOR DR PUNTA GORDA, FL 33955

#### **Current Mailing Address:**

27457 SENATOR DR PUNTA GORDA, FL 33955 US

## FEI Number: 65-0266901

## Name and Address of Current Registered Agent:

Electronic Signature of Registered Agent

MONTGOMERY, TIMOTHY LENN 27457 SENATOR DRIVE PUNTA GORDA, FL 33950 US

Certificate of Status Desired: No

SECRETARY/TREASURER 04/08/2014

Date

# FILED Apr 08, 2014 Secretary of State CC1445421418

Date