

**2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# V33249

**Entity Name:** CHRISTOPHER A. WOLFE & ASSOCIATES, INC.

**FILED**  
**Apr 14, 2015**  
**Secretary of State**  
**CC5078092528**

**Current Principal Place of Business:**

CHRISTOPHER A WOLFE, CLU, CHFC  
7840 SW 86TH ST., STE 21  
MIAMI, FL 33143

**Current Mailing Address:**

CHRISTOPHER A WOLFE, CLU, CHFC  
7840 SW 86TH ST., STE 21  
MIAMI, FL 33143 US

**FEI Number: 65-0338052**

**Certificate of Status Desired: No**

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

WOLFE, CHRISTOPHER A CLU  
7840 SW 86TH ST  
STE 21  
MIAMI, FL 33143 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: CHRISTOPHER A WOLFE**

**04/14/2015**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title MR  
Name WOLFE, CHRISTOPHER  
Address 7840 SW 86TH ST., STE 21  
City-State-Zip: MIAMI FL 33143

*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: CHRISTOPHER A WOLFE**

**PRINCIPAL**

**04/14/2015**

Electronic Signature of Signing Officer/Director Detail

Date