

**2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# V47835

**FILED**  
**Feb 23, 2016**  
**Secretary of State**  
**CC1865883906**

**Entity Name:** SIERK & ASSOCIATES, P.A.

**Current Principal Place of Business:**

11490 OKEECHOBEE BLVD #5  
ROYAL PALM BEACH, FL 33411

**Current Mailing Address:**

11490 OKEECHOBEE BLVD#5  
ROYAL PALM BEACH, FL 33411 US

**FEI Number:** 65-0342837

**Certificate of Status Desired:** No

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

SIERK, CAROLYN A  
11490 OKEECHOBEE BLVD #5  
ROYAL PALM BEACH, FL 33411 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:** CAROLYN A SIERK

02/23/2016

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title D, PRESIDENT  
Name SIERK, CAROLYN A  
Address 11490 OKEECHOBEE BLVD #5  
City-State-Zip: ROYAL PALM BEACH FL 33411

Title DIRECTOR  
Name JANIS, JENNIFER  
Address 11490 OKEECHOBEE BLVD #5  
City-State-Zip: ROYAL PALM BEACH FL 33411

Title DIRECTOR  
Name FISCHER, KRISTEN  
Address 11490 OKEECHOBEE BLVD #5  
City-State-Zip: ROYAL PALM BEACH FL 33411

*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:** CAROLYN SIERK

PRESIDENT

02/23/2016

Electronic Signature of Signing Officer/Director Detail

Date