

2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V67449

Entity Name: COMPUTER MEDIC CENTER OF NORTH PALM BEACH, INC.

Current Principal Place of Business:

9165 S.E. YACHT CLUB CIRCLE
HOBE SOUND, FL 33455

Current Mailing Address:

9165 S.E. YACHT CLUB CIRCLE
HOBE SOUND, FL 33455 US

FEI Number: 65-0411433

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MAGILL, ROBERT K
9165 SE YACHT CLUB CIRCLE
HOBE SOUND, FL 33455 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 MAGILL, ROBERT
Address 9165 SE YACHT CLUB CIRCLE
City-State-Zip: HOBE SOUND FL 33455

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: ROBERT K. MAGILL

PRESIDENT

03/22/2016

Electronic Signature of Signing Officer/Director Detail

Date