

**2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L04000089583

**Entity Name:** MARIA P. HAYES, C.P.A. & ASSOCIATES, PLLC

**Current Principal Place of Business:**

5664 STRAND COURT,  
SUITE B  
NAPLES, FL 34110

**Current Mailing Address:**

5664 STRAND COURT,  
SUITE B  
NAPLES, FL 34110 US

**FEI Number:** 20-4274015

**Certificate of Status Desired:** No

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

HAYES, MARIA P  
5664 STRAND COURT  
SUITE B  
NAPLES, FL 34110 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:** MARIA P HAYES

01/09/2017

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title P  
Name HAYES, MARIA P  
Address 5664 STRAND COURT, STE B  
City-State-Zip: NAPLES FL 34110

Title DIRECTOR  
Name HAYES, KERRY B  
Address 4780 22ND STREET NE  
City-State-Zip: NAPLES FL 34120

Title S  
Name FLOWERS, MARISSA  
Address 5664 STRAND CT. SUITE B  
City-State-Zip: NAPLES FL 34110

Title MGR  
Name HERNANDEZ, JINA  
Address 5664 STRAND CT, SUITE B  
City-State-Zip: NAPLES FL 34110

*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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** MARIA P HAYES

P

01/09/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date