

**2017 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F11000001849

Entity Name: FCJE, INC.

**Current Principal Place of Business:**

27365 U.S. HIGHWAY 19, NORTH  
CLEARWATER, FL 33761

**Current Mailing Address:**

27365 U.S. HIGHWAY 19, NORTH  
CLEARWATER, FL 33761 US

FEI Number: 45-1988112

Certificate of Status Desired: No

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

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301 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            PRESIDENT  
Name            COFFEY, ERIC S  
Address        27365 US HIGHWAY 19 NORTH  
City-State-Zip: CLEARWATER FL 33761

Title            VP  
Name            CASH, JAMES W  
Address        11411 ROCKVILLE PIKE  
City-State-Zip: KENSINGTON MD 20895

Title            DIRECTOR  
Name            FITZGERALD, DOROTHY M  
Address        11411 ROCKVILLE PIKE  
City-State-Zip: KENSINGTON MD 20895

Title            ASAT  
Name            JAFFE, RON  
Address        11411 ROCKVILLE PIKE  
City-State-Zip: KENSINGTON MD 20895

Title            ASAT  
Name            PROKIDANSKY, PATRICIA  
Address        27365 U.S. HIGHWAY 19, NORTH  
City-State-Zip: CLEARWATER FL 33761

*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: PATRICIA PROKIDANSKY

ASAT

01/17/2017

Electronic Signature of Signing Officer/Director Detail

Date