2020 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F16000004189

Entity Name: MAINNERVE FEDERAL SERVICES, INC.

Current Principal Place of Business:

822 A1A NORTH SUITE 310

PONTE VEDRA BEACH, FL 32082

Current Mailing Address:

822 A1A NORTH SUITE 310

PONTE VEDRA BEACH, FL 32082 US

FEI Number: NOT APPLICABLE Certificate of Status Desired: No

Name and Address of Current Registered Agent:

NRAI SERVICES, INC. 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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

FILED May 29, 2020

Secretary of State

5494979809CC

Officer/Director Detail:

Title PRESIDENT Title VP

Name TRONSRUE, GEORGE M. III Name BAILEY, EVAN
Address 822 A1A NORTH Address 1057 BAXTER LANE

822 A1A NORTH Address 1057 BAXTER LANE SUITE 310

City-State-Zip: PONTE VEDRA BEACH FL 32082

Title SECRETARY

Title TREASURER

Name TRONSRUE, GEORGE M. III

Address 822 A1A NORTH SUITE 310

SUITE 310

Address

822 A1A NORTH

City-State-Zip: PONTE VEDRA BEACH FL 32082

Title DIRECTOR

Name TRONSRUE, GEORGE M. III

Address 822 A1A NORTH SUITE 310

822 A1A NORTH SUITE 310

City-State-Zip: PONTE VEDRA BEACH FL 32082

Title DIRECTOR

Name CHAMPOUX, BERNARD S.
Name REBACK, LARRY P.

Address 1807 BROOKTRAIL CT

Address 7818 SWINKS MILL COURT

City-State-Zip: MCLEAN VA 22102 City-State-Zip: VIENNA VA 22182

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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: GEORGE M. TRONSRUE III PRESIDENT 05/29/2020

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

Title DIRECTOR Title DIRECTOR

Name NIXON, JAMES C. Name CAMPBELL, JOHN F.

Address 822 A1A NORTH Address 822 A1A NORTH

SUITE 310 SUITE 310

City-State-Zip: PONTE VEDRA BEACH FL 32082 City-State-Zip: PONTE VEDRA BEACH FL 32082