#### 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: Date Electronic Signature of Registered Agent **Officer/Director Detail :** Title С Title Ρ HARRINGTON, TOM JONES, MONTE Name Name 307 ORCHARD CITY DR., STE 110 Address 307 ORCHARD CITY DR., STE 110 Address City-State-Zip: CAMPBELL CA 95008 CAMPBELL CA 95008 City-State-Zip: Title VP Name HARRINGTON, JONATHAN Address 307 ORCHARD CITY DR., STE 110

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: JONATHAN HARRINGTON

CAMPBELL CA 95008

City-State-Zip:

Electronic Signature of Signing Officer/Director Detail

Entity Name: ON-SITE MANAGER, INC.

2016 FOREIGN PROFIT CORPORATION ANNUAL REPORT

# **Current Principal Place of Business:**

307 ORCHARD CITY DRIVE, STE 110 CAMPBELL. CA 95008

DOCUMENT# F14000001188

## **Current Mailing Address:**

307 ORCHARD CITY DRIVE, STE 110 CAMPBELL, CA 95008

# FEI Number: 77-0516929

## Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 US

Certificate of Status Desired: Yes

Date

03/07/2016

CEO