

**2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# G72833

**Entity Name:** KAMENOFF AND ASSOCIATES, INC.

**Current Principal Place of Business:**

419 ARBOR CT  
CELEBRATION, FL 34747

**Current Mailing Address:**

PO BOX 470643  
CELEBRATION, FL 34747 US

**FEI Number:** 59-2343173

**Certificate of Status Desired:** No

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

AARON J GOROVITZ  
215 N. EOLA DR  
ORLANDO, FL 32801 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 PD  
Name KAMENOFF, MICHAEL A  
Address PO BOX 470643  
City-State-Zip: CELEBRATION FL 34747

Title VPS  
Name KAMENOFF, BRENDA  
Address PO BOX 470643  
City-State-Zip: CELEBRATION FL 34747

Title TD  
Name KAMENOFF, BRENDA  
Address PO BOX 470643  
City-State-Zip: CELEBRATION FL 34747

*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:** MICHAEL A KAMENOFF

**PRESIDENT**

**03/21/2015**

Electronic Signature of Signing Officer/Director Detail

Date