2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11000011061

Entity Name: FLORIDA ASSOCIATION OF MOTORIST SERVICE PROVIDERS

INC.

FILED
Mar 17, 2015
Secretary of State
CC0632774614

Current Principal Place of Business:

11295 S DIXIE HWY PINECREST, FL 33156

Current Mailing Address:

11295 S DIXIE HWY PINECREST, FL 33156

FEI Number: 45-3941513 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATE CREATIONS NETWORK, INC. 11380 PROSPERITY FARMS ROAD #221E PALM BEACH GARDENS, FL 33410 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 | D | Title | D |
|-------|---|-------|---|
| | | | |

NameDE LA VIESCA, JOENameCOLE, PERRYAddress11295 S DIXIE HWYAddress11295 S DIXIE HWYCity-State-Zip:PINECREST FL 33156City-State-Zip:PINECREST FL 33156

Title D Title C

NameFARIAS, SOMAYNameFERRAND, MARYAddress11295 S DIXIE HWYAddress11295 S DIXIE HWYCity-State-Zip:PINECREST FL 33156City-State-Zip:PINECREST FL 33156

Title D Title D

NameCOWART, LONNamePRETE, RICKAddress11295 S DIXIE HWYAddress11295 S DIXIE HWYCity-State-Zip:PINECREST FL 33156City-State-Zip:PINECREST FL 33156

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: PERRY A COLE

Electronic Signature of Signing Officer/Director Detail

TREASURER 03/17/2015