

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N12000003751

Entity Name: I AM RECOVERED INC.

Current Principal Place of Business:

3348 CONWAY BLVD
PORT CHARLOTTE, FL 33952

Current Mailing Address:

3348 CONWAY BLVD
PORT CHARLOTTE, FL 33952

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BYROM, JAMES O
3348 CONWAY BLVD
PORT CHARLOTTE, FL 33952 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 DP
Name BYROM, JAMES O
Address 3348 CONWAY BLVD
City-State-Zip: PORT CHARLOTTE FL 33952

Title DS
Name MORSE, DAVID
Address 3421 WESTLUND TERRACE
City-State-Zip: PORT CHARLOTTE FL 33952

Title DT
Name BYROM, DAVID
Address 3348 CONWAY BLVD
City-State-Zip: PORT CHARLOTTE FL 33952

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: JAMES O. BYROM

PRESIDENT

03/21/2017

Electronic Signature of Signing Officer/Director Detail

Date