#### 2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10000019127

Entity Name: FUCCILLO AFFILIATES OF FLORIDA, INC.

FILED Feb 04, 2014 Secretary of State CC6646589072

# **Current Principal Place of Business:**

404 N. E. PINE ISLAND ROAD CAPE CORAL. FL 33909

# **Current Mailing Address:**

P. O. BOX 69

ADAMS, NY 13605 US

FEI Number: 27-2039649 Certificate of Status Desired: No

### Name and Address of Current Registered Agent:

GARGANO, ANTHONY J 2240 WEST FIRST STREET SUITE 105 FORT MYERS, FL 33901 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 P Title S

Name FUCCILLO, WILLIAM B Name FUCCILLO, WILLIAM B

Address 6000 TARPON ESTATES BLVD Address 6000 TARPON ESTATES BLVD

City-State-Zip: CAPE CORAL FL 33914 City-State-Zip: CAPE CORAL FL 33914

Title T Title D

Name FUCCILLO, WILLIAM B Name FUCCILLO, WILLIAM B

Address 6000 TARPON ESTATES BLVD Address 6000 TARPON ESTATES BLVD
City-State-Zip: CAPE CORAL FL 33914 City-State-Zip: CAPE CORAL FL 33914

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: WILLIAM B. FUCCILLO

**PRESIDENT** 

02/04/2014