

**2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P10000019127

**Entity Name:** FUCCILLO AFFILIATES OF FLORIDA, INC.

**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  
Name FUCCILLO, WILLIAM B  
Address 6000 TARPON ESTATES BLVD  
City-State-Zip: CAPE CORAL FL 33914

Title S  
Name FUCCILLO, WILLIAM B  
Address 6000 TARPON ESTATES BLVD  
City-State-Zip: CAPE CORAL FL 33914

Title T  
Name FUCCILLO, WILLIAM B  
Address 6000 TARPON ESTATES BLVD  
City-State-Zip: CAPE CORAL FL 33914

Title D  
Name FUCCILLO, WILLIAM B  
Address 6000 TARPON ESTATES BLVD  
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

P, D

01/19/2015

Electronic Signature of Signing Officer/Director Detail

Date