

**2021 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P16000003044

**Entity Name:** MICHELE L. HARVEY PA

**Current Principal Place of Business:**

2764 S BASCOMBE AVE  
HOMOSASSA, FL 34448

**Current Mailing Address:**

2764 S BASCOMBE AVE  
HOMOSASSA, FL 34448 US

**FEI Number:** 81-1016395

**Certificate of Status Desired:** No

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

HARVEY, MICHELE L  
2764 S BASCOMBE AVE  
HOMOSASSA, FL 34448 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 PST  
Name HARVEY, MICHELE L  
Address 2764 S. BASCOMBE AVE  
City-State-Zip: HOMOSASSA FL 34448

*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:** MICHELE L. HARVEY

**PRESIDENT**

**09/08/2021**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date