

**2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P16000014443

**FILED**  
**Mar 14, 2017**  
**Secretary of State**  
**CC0122392648**

**Entity Name:** M2 PROPERTY & RISK MANAGEMENT CONSULTING, INC.

**Current Principal Place of Business:**

888 FOREST GLEN RD.  
CLEARWATER, FL 33765

**Current Mailing Address:**

888 FOREST GLEN RD.  
CLEARWATER, FL 33765 US

**FEI Number:** 59-2175122

**Certificate of Status Desired:** Yes

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

MENDENHALL, DEBORAH  
888 FOREST GLEN RD.  
CLEARWATER, FL 33765 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 MENDENHALL, DEBORAH  
Address 888 FOREST GLEN RD.  
City-State-Zip: CLEARWATER FL 33765

Title VP  
Name MALLOY, HARRY  
Address 888 FOREST GLEN RD.  
City-State-Zip: CLEARWATER FL 33765

Title S  
Name MENDENHALL, DEBORAH  
Address 888 FOREST GLEN RD.  
City-State-Zip: CLEARWATER FL 33765

Title T  
Name MENDENHALL, DEBORAH  
Address 888 FOREST GLEN RD.  
City-State-Zip: CLEARWATER FL 33765

*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:** DEBORAH MENDENHALL

**PRESIDENT**

**03/14/2017**

Electronic Signature of Signing Officer/Director Detail

Date