

**2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P15000074410

**Entity Name:** C2C MANAGEMENT, INC.

**Current Principal Place of Business:**

4613 NORTH UNIVERSITY DRIVE, #392  
CORAL SPRINGS, FL 33067

**Current Mailing Address:**

4613 NORTH UNIVERSITY DRIVE, SUITE 392  
CORAL SPRINGS, FL 33067 US

**FEI Number:** 47-4996534

**Certificate of Status Desired:** No

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

ANDERSON REGISTERED AGENTS, INC.  
625 E.TWIGGS STREET  
SUITE 110  
TAMPA, FL 33602 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            PRESIDENT, SECRETARY,  
                      TREASURER, DIRECTOR  
Name            WARD, TARIN  
Address        4613 NORTH UNIVERSITY DRIVE,  
                      SUITE 392  
City-State-Zip: CORAL SPRINGS FL 33067

*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:** TARIN WARD

**PRESIDENT**

**04/24/2024**

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

\_\_\_\_\_ Date