2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000001858

Entity Name: ACADEMY OF FLORIDA MANAGEMENT ATTORNEYS, INC.

FILED
Jan 30, 2016
Secretary of State
CC4227031575

Current Principal Place of Business:

450 E LAS OLAS BLVD

STE 800

FORT LAUDERDALE, FL 33301

Current Mailing Address:

5256 VENTURA DRIVE

DELRAY BEACH, FL 33484 US

FEI Number: 65-1106067 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CAULKINS, CHARLES S 450 E LAS OLAS BLVD STE 800

FORT LAUDERDALE, FL 33301 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:

Officer/Director Detail:

Title D Title D. VP

Electronic Signature of Registered Agent

Name BERNSTEIN, STEVEN Name BLOCK, DAVID

Address 401 E JACKSON ST-2300 SUN TRUST Address C/O JACKSON LEWIS

FINANCIAL TWO SOUTH BISCAYNE BLVE 3500

City-State-Zip: TAMPA FL 33602 City-State-Zip: MIAMI FL 33131

Title DST Title D, OTHER

Name HOLTZMAN, GAIL Name HOLSHOUSER, ERIC

Address C/O JACKSON LEWIS Address C/O BUCHANAN INGERSOL

100 SOUTH ASHLEY DRIVE 50 NORTH LAURAL STREET

City-State-Zip: TAMPA FL 33602 City-State-Zip: JACKSONVILLE FL 32202

Title DP

Name SNIFFEN, ROB

Address 123 NORTH MONROE ST City-State-Zip: TALLAHASSEE FL 32301

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: ROB SNIFFEN DIRECTOR & PRESIDENT 01/30/2016

Date