

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000001858

Entity Name: ACADEMY OF FLORIDA MANAGEMENT ATTORNEYS, INC.**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:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

| | |
|-----------------|---|
| Title | DIRECTOR |
| Name | BERG, LISA |
| Address | C/O STEARNS WEAVER 150 W. FLAGLER |
| City-State-Zip: | MIAMI FL 33130 |
| Title | D, VP |
| Name | MCCLELLAND, DENNIS |
| Address | PHelps DUNBAR 100 S. ASHLEY DRIVE |
| City-State-Zip: | TAMPA FL 33601 |
| Title | D, OTHER |
| Name | VANCE, KEVIN |
| Address | C/O DUANE MORRIS 1875 NW CORPORATE BLVD SUITE 300 |
| City-State-Zip: | BOCA RATON FL 33431 |

| | |
|-----------------|---|
| Title | D, PRESIDENT |
| Name | GABRIELLE, ERIC |
| Address | C/O STEARNS, WEAVER 200 E. LAS OLAS BLVD |
| City-State-Zip: | FORT LAUDERDALE FL 33301 |
| Title | D, S, T |
| Name | KLINE, ARLENE |
| Address | AKERMAN LLP 777 SOUTH FLAGLER DRIVE SUITE 1100 WEST TOWER |
| City-State-Zip: | WEST PALM BEACH FL 33401 |

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: ERIC GABRIELLE

PRESIDENT

01/29/2021

Electronic Signature of Signing Officer/Director Detail_____
Date