

**2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 176774

**Entity Name:** WEEKES & CALLAWAY, INC.**Current Principal Place of Business:**3945 W ATLANTIC AVE.  
DELRAY BEACH, FL 33445**Current Mailing Address:**6050 OAK TREE BLVD., SUITE 500  
CLEVELAND, OH 44131 US**FEI Number:** 59-0714699**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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:** DIANE STOUT

03/21/2018

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title PRES  
Name WEEKES, LEE  
Address 3945 WEST ATLANTIC AVE.  
City-State-Zip: DELRAY BCH FL 33445

Title SEC  
Name GLEESPEN, MICHAEL W  
Address 6050 OAK TREE BLVD., SUITE 500  
City-State-Zip: CLEVELAND OH 44131

Title DIRECTOR  
Name MORELLI, MATTHEW J  
Address 6050 OAK TREE BLVD., SUITE 500  
City-State-Zip: CLEVELAND OH 44131

Title VP  
Name KOWALSKI, BRUCE J.  
Address 6050 OAK TREE BLVD., SUITE 500  
City-State-Zip: CLEVELAND OH 44131

Title VP  
Name MELLARD, NANCY M  
Address 700 W. 47TH STREET, SUITE 1100  
City-State-Zip: KANSAS CITY MO 64112

Title TREASURER  
Name SOBE, CYNTHIA L  
Address 6050 OAK TREE BLVD., SUITE 500  
City-State-Zip: CLEVELAND OH 44131

Title ASST. SECRETARY  
Name GEFFERT, JOHN J  
Address 6050 OAK TREE BLVD., SUITE 500  
City-State-Zip: CLEVELAND OH 44131

*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:** MICHAEL W GLEESPEN**SECRETARY**

03/21/2018

Electronic Signature of Signing Officer/Director Detail

Date