# 2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 194593

Entity Name: WATSCO, INC.

### **Current Principal Place of Business:**

2665 S BAYSHORE DRIVE SUITE 901 COCONUT GROVE, FL 33133

# **Current Mailing Address:**

2665 S BAYSHORE DRIVE SUITE 901 COCONUT GROVE, FL 33133

### FEI Number: 59-0778222

### Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525 US FILED Jan 13, 2015 Secretary of State CC5456715702

Certificate of Status Desired: No

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

# Officer/Director Detail :

	enneen/Biree			
	Title	CHAIRMAN, PRESIDENT, CEO	Title	VP, CFO, ASST. SECRETARY, TREASURER
	Name	NAHMAD, ALBERT H	Name	MENENDEZ, ANA M
	Address	2665 S BAYSHORE DRIVE, SUITE 901 COCONUT GROVE FL 33133	Address	2665 S BAYSHORE DRIVE SUITE 901
				COCONUT GROVE FL 33133
	City-State-Zip.	COCONDI GROVE PE 35135	City-State-Zip:	COCONUT GROVE FL 33133
	Title	SVP, SECRETARY	Title	D
	Name	LOGAN, BARRY S	Name	MANLEY, PAUL F
	Address	2665 S BAYSHORE DRIVE SUITE 901	Address	2665 S BAYSHORE DRIVE SUITE 901
	City-State-Zip:	COCONUT GROVE FL 33133	City-State-Zip:	COCONUT GROVE FL 33133
	Title	VP	Title	VP OF STRATEGY AND INNOVATION
	Name	JOHNSTON, PAUL	Name	NAHMAD, AJ
	Address	2665 S. BAYSHORE DRIVE, STE. 901	Address	2665 S BAYSHORE DRIVE
				SUITE 901
	City-State-Zip:	COCONUT GROVE FL 33133	City-State-Zip:	SUITE 901 COCONUT GROVE FL 33133
	City-State-Zip: Title	COCONUT GROVE FL 33133 DIRECTOR	, ,	COCONUT GROVE FL 33133
	Title	DIRECTOR	Title	COCONUT GROVE FL 33133 DIRECTOR
	Title Name	DIRECTOR ALVAREZ, CESAR L	, ,	COCONUT GROVE FL 33133
	Title	DIRECTOR	Title	COCONUT GROVE FL 33133 DIRECTOR
	Title Name	DIRECTOR ALVAREZ, CESAR L 2665 S BAYSHORE DRIVE	Title Name	COCONUT GROVE FL 33133 DIRECTOR DARNELL, DAVID C 2665 S BAYSHORE DRIVE

### Continues on page 2

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: BARRY S LOGAN

SVP

Date

Electronic Signature of Signing Officer/Director Detail

# **Officer/Director Detail Continued :**

Title	DIRECTOR	Title	DIRECTOR
Name	DICKENS, DENISE	Name	SAPE, GEORGE P
Address	2665 S BAYSHORE DRIVE SUITE 901	Address	2665 S BAYSHORE DRIVE SUITE 901
City-State-Zip:	COCONUT GROVE FL 33133	City-State-Zip:	COCONUT GROVE FL 33133
Title	DIRECTOR		

TitleDIRECTORNameFEDRIZZI, STEVEN RAddress2665 S BAYSHORE DRIVE<br/>SUITE 901

City-State-Zip: COCONUT GROVE FL 33133