

2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 231846

Entity Name: MOCK, ROOS & ASSOCIATES, INC.**Current Principal Place of Business:**5720 CORPORATE WAY
WEST PALM BEACH, FL 33407**Current Mailing Address:**5720 CORPORATE WAY
WEST PALM BEACH, FL 33407**FEI Number:** 59-0878800**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**ZIMMERMAN, DALE WM
5720 CORPORATE WAY
WEST PALM BCH., FL 33407-9004 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	CMP
Name	ZIMMERMAN, DALE WM
Address	5720 CORPORATE WAY
City-State-Zip:	WEST PALM BEACH FL 33407-9004

Title	EXEC. VICE PRESIDENT
Name	BIGGS, THOMAS A
Address	5720 CORPORATE WAY
City-State-Zip:	WEST PALM BEACH FL 33407-9004

Title	V
Name	CLODFELTER, MARY H
Address	5720 CORPORATE WAY
City-State-Zip:	WEST PALM BEACH FL 33407-9004

Title	VP
Name	WERTEPNY, ALAN D
Address	5720 CORPORATE WAY
City-State-Zip:	WEST PALM BEACH FL 33407

Title	S
Name	MCCRAY, DEBRA C
Address	5720 CORPORATE WAY
City-State-Zip:	WEST PALM BEACH FL 33407-9004

Title	T
Name	FORD, JOHN P
Address	5720 CORPORATE WAY
City-State-Zip:	WEST PALM BEACH FL 33407-9004

Title	SR. VICE PRESIDENT
Name	GRUBER, GARRYTT G
Address	5720 CORPORATE WAY
City-State-Zip:	WEST PALM BEACH FL 33407-9004

Title	VP
Name	ZIMMERMAN, DEREK L
Address	5720 CORPORATE WAY
City-State-Zip:	WEST PALM BEACH FL 33407

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: DEBRA MCCRAY**SECRETARY****01/21/2020**_____
Electronic Signature of Signing Officer/Director Detail_____
Date