

2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 308322

Entity Name: DONALD W. MCINTOSH ASSOCIATES, INC.**Current Principal Place of Business:**2200 PARK AVENUE NORTH
WINTER PARK, FL 32789-2355**Current Mailing Address:**2200 PARK AVENUE NORTH
WINTER PARK, FL 32789-2355 US**FEI Number:** 59-1151358**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**MCINTOSH, DONALD WJR
2200 PARK AVENUE NORTH
WINTER PARK, FL 32789-2355 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 PRESIDENT, CEO
Name MCINTOSH, DONALD W. JR.
Address 211 GENIUS DRIVE
City-State-Zip: WINTER PARK FL 32789

Title VP, CHIEF OF STAFF
Name HATCH, JANET B.
Address 1655 COPPERLEAF COVE
City-State-Zip: OVIEDO FL 32766

Title SR. VP
Name GROSSMAN, SCOTT E.
Address 288 MACARTHUR PLACE
City-State-Zip: MAITLAND FL 32751

Title SR. VP
Name TOWNSEND, JOHN T.
Address 964 GALWAY BLVD.
City-State-Zip: APOPKA FL 32703

Title EXECUTIVE VP
Name FLORIO, JOHN M.
Address 652 MAGNOLIA DRIVE
City-State-Zip: ALTAMONTE SPRINGS FL 32701

Title SR. VP, CFO
Name NAUGLE, GREGORY M.
Address 1150 WILLOWBROOK TRAIL
City-State-Zip: MAITLAND FL 32751

Title SR. VP
Name NEWTON, JEFFREY J.
Address 825 PARKSIDE POINTE
City-State-Zip: APOPKA FL 32712

Title SR. VP
Name WHITE, KIRBY L.
Address 1000 CINNAMON FERN COURT
City-State-Zip: CASSELBERRY FL 32707

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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: GREGORY M NAUGLE**CFO****04/19/2019**_____
Electronic Signature of Signing Officer/Director Detail_____
Date

Officer/Director Detail Continued :

Title VP
Name CARSON, ROCKY L.
Address 602 SOUTH RANGER BLVD.
City-State-Zip: WINTER PARK FL 32792

Title VP
Name NUGENT, JAMES C
Address 1020 NORTH SHINE AVENUE
City-State-Zip: ORLANDO FL 32803

Title VP
Name ROBINSON, BEVERLY P.
Address 505 TUDOR CIRCLE
City-State-Zip: ALTAMONTE SPRINGS FL 32701