

**2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 331832

**Entity Name:** FLORIDA MECHANICAL SYSTEMS, INC.

**Current Principal Place of Business:**

526 STOCKTON STREET  
JACKSONVILLE, FL 32204

**Current Mailing Address:**

526 STOCKTON STREET  
JACKSONVILLE, FL 32204

**FEI Number:** 59-1212797

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

COLD, KATHLEEN H  
HOLBROOK, AKEL, COLD, STIEFEL AND RAY  
1 INDEPENDENT DRIVE, SUITE 2301  
JACKSONVILLE, FL 32202 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 P/D  
Name GAY, WILLIAM W  
Address 5809 CEDAR OAKS DRIVE  
City-State-Zip: JACKSONVILLE FL

Title DVP  
Name GAY, ROBERT D.  
Address 4961 ORTEGA FARMS BLVD  
City-State-Zip: JACKSONVILLE FL 32210

Title ST  
Name KING, CAROL  
Address 526 STOCKTON STREET  
City-State-Zip: JACKSONVILLE FL 32204

Title VP  
Name WHITEMAN, MICHAEL G  
Address 844 SHERBROOK LANE  
City-State-Zip: JACKSONVILLE FL 32221

*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:** CAROL KING

**SECRETARY**

**02/09/2017**

Electronic Signature of Signing Officer/Director Detail

Date