2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 421811

Entity Name: BRPH ARCHITECTS ENGINEERS, INC.

Current Principal Place of Business:

5700 N HARBOR CITY BOULEVARD SUITE 400 MELBOURNE, FL 32940

Current Mailing Address:

5700 N HARBOR CITY BOULEVARD SUITE 400 MELBOURNE, FL 32940 US

FEI Number: 59-1447471

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301 US

FILED Apr 19, 2017 Secretary of State CC0798574107

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 :

•••			
Title	PRESIDENT, DIRECTOR	Title	SENIOR VP, DIRECTOR
Name	CURTIN, BRIAN E	Name	VIGIL, CARROLL C
Address	146 ISLAND VIEW DRIVE	Address	5700 N HARBOR CITY BOULEVARD SUITE 400
City-State-Zip:	INDIAN HARBOR BEACH FL 32937	City-State-Zip:	MELBOURNE FL 32940
Title	DIRECTOR	Title	SENIOR VP
Name	ROW, WILLIAM H	Name	THRON, RANDALL E
Address	5700 N HARBOR CITY BOULEVARD		,
	SUITE 400	Address	457 BLUFF DRIVE
City-State-Zip:	MELBOURNE FL 32940	City-State-Zip:	MELBOURNE FL 32901
Title	SENIOR VP, DIRECTOR	Title	VP
Name	BERNICH, MICHAEL M	Name	MILLER, ANDREW H
Address	2601 FENTON COURT	Address	5700 N HARBOR CITY BOULEVARD SUITE 400
City-State-Zip:	MELBOURNE FL 32901	City-State-Zip:	MELBOURNE FL 32940
Title	VP, SECRETARY	Title	DIRECTOR
Name	MORRISON, ROBBIE R		
Address	5700 N HARBOR CITY BOULEVARD	Name	MCDERMOTT, JANIE
	SUITE 400	Address	5700 N HARBOR CITY BOULEVARD SUITE 400
City-State-Zip:	MELBOURNE FL 32940	City-State-Zip:	MELBOURNE FL 32940

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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: ROBBIE R MORRISON

SECRETARY

04/19/2017

Date

Electronic Signature of Signing Officer/Director Detail

Officer/Director Detail Continued :

Title	DIRECTOR
Name	DIVEN, LINDSAY
Address	5700 N HARBOR CITY BOULEVARD SUITE 400
City-State-Zip:	MELBOURNE FL 32940