

**2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 475402

**Entity Name:** HELMAN HURLEY CHARVAT PEACOCK/ARCHITECTS, INC.

**FILED**  
**Jan 31, 2024**  
**Secretary of State**  
**0664879067CC**

**Current Principal Place of Business:**

120 N. ORANGE AVENUE  
ORLANDO, FL 32801

**Current Mailing Address:**

120 N. ORANGE AVENUE  
ORLANDO, FL 32801 US

**FEI Number: 59-1593719**

**Certificate of Status Desired: Yes**

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

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301 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           VP  
Name           CHATHAM, MICHAEL K  
Address        120 N. ORANGE AVENUE  
City-State-Zip: ORLANDO FL 32801

Title           VP  
Name           DUNGAN, GREGORY J  
Address        120 N. ORANGE AVENUE  
City-State-Zip: ORLANDO FL 32801

Title           DST  
Name           CLINITE, ERIK A  
Address        5016 CENTENNIAL BLVD, 3RD FL  
City-State-Zip: NASHVILLE TN 37209

Title           DST  
Name           CLINITE, ERIK A  
Address        5016 CENTENNIAL BLVD, 3RD FLOOR  
City-State-Zip: NASHVILLE TN 37209

Title           DP  
Name           KOLEJKA, MIKE  
Address        5016 CENTENNIAL BLVD., 3RD FLOOR  
City-State-Zip: NASHVILLE TN 37209

*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: MICHAEL K CHATHAM**

**VP**

**01/31/2024**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date