

2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 537142

Entity Name: HOWELL & THORNHILL, P.A.**Current Principal Place of Business:**1350 HAVENDALE BLVD
WINTER HAVEN, FL 33881-1386**Current Mailing Address:**PO BOX 1499
WINTER HAVEN, FL 33882**FEI Number: 59-1746500****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**THORNHILL, ROBERT G. JR.
1350 HAVENDALE BLVD
WINTER HAVEN, FL 33881 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	PD
Name	THORNHILL, ROBERT GJR
Address	1350 HAVENDALE BLVD
City-State-Zip:	WINTER HAVEN FL 33881

Title	VP
Name	THORNHILL, ROBERT GIII
Address	1350 HAVENDALE BLVD
City-State-Zip:	WINTER HAVEN FL 33881

Title	S
Name	STOIA, PAT
Address	1350 HAVENDALE BLVD
City-State-Zip:	WINTER HAVEN FL 33881

Title	DIRECTOR
Name	SCARBOROUGH, SHERRI
Address	1350 HAVENDALE BLVD
City-State-Zip:	WINTER HAVEN FL 33881-1386

Title	DIRECTOR
Name	PASTORIN, SPENCER
Address	1350 HAVENDALE BLVD
City-State-Zip:	WINTER HAVEN FL 33881-1386

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: ROBERT G THORNHILL**PRESIDENT****01/16/2018**_____
Electronic Signature of Signing Officer/Director Detail_____
Date