

2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 600277

FILED
Mar 01, 2017
Secretary of State
CC4195344684

Entity Name: RICHMAN GREER, PROFESSIONAL ASSOCIATION

Current Principal Place of Business:

396 ALHAMBRA CIRCLE
NORTH TOWER, 14TH FLOOR
MIAMI, FL 33134

Current Mailing Address:

396 ALHAMBRA CIRCLE
NORTH TOWER, 14TH FLOOR
MIAMI, FL 33134 US

FEI Number: 59-1172536

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GARCIA-LINARES, MANUEL A.
396 ALHAMBRA CIRCLE
NORTH TOWER, 14TH FL.
MIAMI, FL 33134 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: MANUEL A. GARCIA-LINARES

03/01/2017

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PD
Name RICHMAN, GERALD F.
Address 396 ALHAMBRA CIRCLE NORTH
TOWER 14TH FLOOR
City-State-Zip: MIAMI FL 33134

Title SDVP
Name GARCIA-LINARES, MANUEL
Address 396 ALHAMBRA CIRCLE NORTH
TOWER 14TH FLOOR
City-State-Zip: MIAMI FL 33134

Title VP
Name GREER, ALAN G
Address 396 ALHAMBRA CIRCLE NORTH
TOWER 14TH FLOOR
City-State-Zip: MIAMI FL 33134

Title AVP
Name JOHNSON, CHARLES H
Address 396 ALHAMBRA CIRCLE NORTH
TOWER 14TH FLOOR
City-State-Zip: MIAMI FL 33134

Title AVP
Name ROMANCE, MARK A
Address 396 ALHAMBRA CIRCLE
NORTH TOWER, 14TH FLOOR
City-State-Zip: MIAMI FL 33134

Title TREASURER
Name BETENSKY, GARY B.
Address 396 ALHAMBRA CIRCLE
NORTH TOWER, 14TH FLOOR
City-State-Zip: MIAMI FL 33134

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: MANUEL A. GARCIA-LINARES

SDVP

03/01/2017

Electronic Signature of Signing Officer/Director Detail

Date