

**2022 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 654143

**Entity Name:** FLAD & ASSOCIATES OF FLORIDA, INC.**Current Principal Place of Business:**5411 SKYCENTER DRIVE  
STE 220  
TAMPA, FL 33607**Current Mailing Address:**P.O. BOX 5620  
MADISON, WI 53705 US**FEI Number:** 39-1346633**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**BUSINESS FILINGS INCORPORATED  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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            PRESIDENT, DIRECTOR  
Name            ZUTZ, JEFFREY C  
Address        644 SCIENCE DRIVE  
City-State-Zip: MADISON WI 53711

Title            TREASURER  
Name            POPPEN, MITCHELL D  
Address        PO BOX 5620  
City-State-Zip: MADISON WI 53705

Title            VP, DIRECTOR  
Name            JACKSON, STEVEN R  
Address        1310 SW 13TH ST.  
                 UNIT C  
City-State-Zip: GAINESVILLE FL 32601

Title            DIRECTOR  
Name            BAUCH, JOHN O  
Address        644 SCIENCE DRIVE  
City-State-Zip: MADISON WI 53711

Title            SECRETARY  
Name            HENSHUE, KATHRYN L  
Address        PO BOX 5620  
City-State-Zip: MADISON WI 53705

*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:** KATHRYN L. HENSHUE**SECRETARY****03/10/2022**

Electronic Signature of Signing Officer/Director Detail

Date