

2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F74110

Entity Name: BEECHER CARLSON OF FLORIDA, INC.**Current Principal Place of Business:**SIX CONCOURSE PARKWAY
SUITE 2300
ATLANTA, GA 30328**Current Mailing Address:**SIX CONCOURSE PARKWAY
SUITE 2300
ATLANTA, GA 30328 US**FEI Number:** 59-2174673**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CT CORPORATION SYSTEM
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 VICE PRESIDENT & SECRETARY
Name LLOYD, ROBERT W.
Address 220 S. RIDGEWOOD AVENUE
City-State-Zip: DAYTONA BEACH FL 32114

Title VP
Name WATTS, ANDY
Address 220 S. RIDGEWOOD AVE.
City-State-Zip: DAYTONA BEACH FL 32114

Title VP
Name LANNI, JAMES
Address 220 S. RIDGEWOOD AVENUE
City-State-Zip: DAYTONA BEACH FL 32114

Title VICE PRESIDENT & ASSISTANT
SECRETARY
Name ROBINSON, ANTHONY
Address 220 S. RIDGEWOOD AVE.
City-State-Zip: DAYTONA BEACH FL 32114

Title PRESIDENT
Name DENTON, STEVEN
Address SIX CONCOURSE PARKWAY
SUITE 2300
City-State-Zip: ATLANTA GA 30328

Title DIRECTOR
Name DENTON, STEVEN
Address SIX CONCOURSE PARKWAY
SUITE 2300
City-State-Zip: ATLANTA GA 30328

Title TREASURER
Name TOFIL, J. SCOTT
Address SIX CONCOURSE PARKWAY
SUITE 2300
City-State-Zip: ATLANTA GA 30328

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: ANTHONY ROBINSONVICE PRESIDENT &
ASSISTANT SECRETARY

04/14/2017

Electronic Signature of Signing Officer/Director Detail_____
Date