

**2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# H83455

**Entity Name:** HPBM, INC.

**Current Principal Place of Business:**

515 N FLAGLER DR, SUITE 1500  
WEST PALM BEACH, FL 33401

**Current Mailing Address:**

515 N FLAGLER DR, SUITE 1500  
WEST PALM BEACH, FL 33401 US

**FEI Number:** 36-3393673

**Certificate of Status Desired:** No

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

SERVICE U.S.A. INC  
515 N FLAGLER DR, SUITE 1500  
WEST PALM BEACH, FL 33401 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            SECRETARY  
Name            MUEHLSTEIN, JOHN H.  
Address        161 N. CLARK ST., STE. 3100  
City-State-Zip: CHICAGO IL

Title            DIRECTOR  
Name            BUNTROCK, DEAN  
Address        ONE TOWER LANE STE 2242  
City-State-Zip: OAK BROOK IL 60181-4636

Title            PRESIDENT  
Name            HUIZENGA, H. WAYNE JR.  
Address        515 N FLAGLER DR, SUITE 1500  
City-State-Zip: WEST PALM BEACH FL 33401

Title            VP, ASST. SECRETARY, TREASURER  
Name            BRANDEN, CRIS V  
Address        515 N FLAGLER DR, SUITE 1500  
City-State-Zip: WEST PALM BEACH FL 33401

Title            VP  
Name            MUXO, ALEX  
Address        515 N FLAGLER DR, SUITE 1500  
City-State-Zip: WEST PALM BEACH FL 33401

*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:** CRIS BRANDEN

VP

02/16/2024

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

\_\_\_\_\_  
Date