### 2015 FLORIDA PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# H87775

Entity Name: FLORIDA MIDDLE PROPERTIES, INC.

**FILED** Jan 20, 2015 **Secretary of State** CC3013179277

# **Current Principal Place of Business:**

205 S. HOOVER STREET

400

TAMPA, FL 33609

## **Current Mailing Address:**

205 S. HOOVER STREET 400

TAMPA, FL 33609

FEI Number: 59-2623788 Certificate of Status Desired: No

### Name and Address of Current Registered Agent:

WILSON, J STYLES 205 S. HOOVER STREET #400 TAMPA, FL 33609 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:

PTD Title Title VP, DIRECTOR

CARTER, SHIRLEY Name Name THATCHER, ALLISON 205 S HOOVER STREET #400 205 S HOOVER ST #400 Address Address

City-State-Zip: TAMPA FL City-State-Zip: TAMPA FL 33609

Title VP, DIRECTOR Title **VSD** 

THATCHER, CAROLYN Name THATCHER, JONATHAN Name 205 S. HOOVER #400 Address 205 S. HOOVER STREET #400 Address City-State-Zip: TAMPA FL 33609 TAMPA FL 33609 City-State-Zip:

Title **DIRECTOR** Title VP, DIRECTOR

Name ANGLIN, KIMBERLY Address 205 S. HOOVER STREET Address

205 S. HOOVER #400 400

**PRESIDENT** 

FARMER, JAMES D

Name

City-State-Zip: TAMPA FL 33609 City-State-Zip: **TAMPA FL 33609** 

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: SHIRLEY CARTER

Electronic Signature of Signing Officer/Director Detail

01/20/2015