

2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H87775

Entity Name: FLORIDA MIDDLE PROPERTIES, INC.

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 :

Title VP, DIRECTOR
Name CARTER, SHIRLEY
Address 205 S HOOVER STREET #400
City-State-Zip: TAMPA FL 33609

Title VP, DIRECTOR
Name GRANELL, ALLISON
Address 205 S HOOVER ST #400
City-State-Zip: TAMPA FL

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

Title VP, DIRECTOR, TREASURER
Name THATCHER, JONATHAN
Address 205 S. HOOVER #400
City-State-Zip: TAMPA FL 33609

Title VP, DIRECTOR, SECRETARY
Name ANGLIN, KIMBERLY
Address 205 S. HOOVER #400
City-State-Zip: TAMPA FL 33609

Title DIRECTOR
Name FARMER, JAMES D
Address 205 S. HOOVER STREET
400
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 ANN CARTER

VP

02/15/2016

Electronic Signature of Signing Officer/Director Detail

Date