

**2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# J80135

**Entity Name:** CALER, DONTEN, LEVINE, COHEN, PORTER & VEIL, P.A.**Current Principal Place of Business:**505 SOUTH FLAGLER DRIVE  
SUITE 900  
WEST PALM BEACH, FL 33401**Current Mailing Address:**505 SOUTH FLAGLER DRIVE  
SUITE 900  
WEST PALM BEACH, FL 33401 US**FEI Number:** 59-2831281**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CALER, WILLIAM K JR.  
505 SOUTH FLAGLER DRIVE  
SUITE 900  
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:** WILLIAM K CALER JR.

02/14/2017

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title VP, DIRECTOR  
Name DONTEN, DAVID S  
Address 2334 PALM HARBOUR DR  
City-State-Zip: PALM BEACH GARDENS FL 33410

Title VP, DIRECTOR  
Name LEVINE, JOEL H  
Address 2050 SUNDERLAND AVENUE  
City-State-Zip: WELLINGTON FL 33414

Title VP, DIRECTOR  
Name VEIL, MARK D  
Address 107 WOODSMUIR COURT  
City-State-Zip: PALM BCH GARDENS FL 33418

Title VP, DIRECTOR  
Name PORTER, SCOTT L  
Address 14211 LITTLE CYPRESS CIRCLE  
City-State-Zip: PALM BEACH GARDENS FL 33410

Title SECRETARY, DIRECTOR  
Name CALER, WILLIAM K JR.  
Address 234 DYER RD  
City-State-Zip: WEST PALM BEACH FL 33405

Title PRESIDENT, DIRECTOR  
Name COHEN, LOUIS M  
Address 732 SANDY POINT LANE  
City-State-Zip: PALM BEACH GARDENS FL 33410

Title TREASURER  
Name MULLEN, JAMES F IV  
Address 2904 NORTH MILLER DRIVE  
City-State-Zip: PALM BEACH GARDENS FL 33410

Title VP  
Name PENCE, THOMAS A  
Address 7535 SE FOREST OAK LANE  
City-State-Zip: HOBE SOUND FL 33455

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*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:** JAMES F. MULLEN IV

TREASURER

02/14/2017

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title VP  
Name COURTNEY, JOHN C  
Address 505 SOUTH FLAGLER DR, SUITE 900  
City-State-Zip: WEST PALM BEACH FL 33401

Title VP  
Name NALEZYTY, MICHAEL J  
Address 800 JEFFREY STREET  
#111  
City-State-Zip: BOCA RATON FL 33487

Title VP  
Name HUTCHISON, JAMES B  
Address 625 PILOT ROAD  
City-State-Zip: NORTH PALM BEACH FL 33408