

2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K19469

FILED
Feb 04, 2020
Secretary of State
4674048980CC

Entity Name: SMITH BIGMAN BROCK, P.A.

Current Principal Place of Business:

444 SEABREEZE BLVD SUITE 900
DAYTONA BEACH, FL 32118

Current Mailing Address:

P.O. BOX 15200
DAYTONA BEACH, FL 32115 US

FEI Number: 59-2880513

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SEABREEZE CORPORATE SERVICES, LLC
444 SEABREEZE BLVD
STE 900
DAYTONA BEACH, FL 32118 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 DIRECTOR, VP, SECRETARY
Name SMITH, HORACE JR.
Address 444 SEABREEZE BLVD STE 900
City-State-Zip: DAYTONA BCH. FL 32118

Title DIRECTOR, PRESIDENT
Name BROCK, JEFFREY P
Address 444 SEABREEZE BLVD., SUITE 900
City-State-Zip: DAYTONA BEACH FL 32118

Title DIRECTOR, VP, TREASURER
Name BIGMAN, JEFFREY E
Address 444 SEABREEZE BLVD SUITE 900
City-State-Zip: DAYTONA BEACH FL 32118

Title DIRECTOR, VP
Name METZ, SARAH L
Address 444 SEABREEZE BLVD SUITE 900
City-State-Zip: DAYTONA BEACH FL 32118

Title DIRECTOR, VP
Name GANZ, FRANK S
Address 444 SEABREEZE BLVD SUITE 900
City-State-Zip: DAYTONA BEACH FL 32118

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: JEFFREY P. BROCK

PRESIDENT

02/04/2020

Electronic Signature of Signing Officer/Director Detail

_____ Date