

**2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# K85573

**Entity Name:** MCGEE & POWERS, P.A.

**Current Principal Place of Business:**

C/O PATRICK A. MCGEE  
201 E PINE STREET STE 700  
ORLANDO, FL 32801

**Current Mailing Address:**

C/O PATRICK A. MCGEE  
201 E PINE STREET STE 700  
ORLANDO, FL 32801

**FEI Number:** 59-2955360

**Certificate of Status Desired:** No

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

MCGEE, PATRICK A.  
201 E PINE STREET STE 700  
ORLANDO, FL 32801 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            DPT  
Name            MCGEE, PATRICK A.  
Address        201 E PINE STREET STE700  
City-State-Zip: ORLANDO FL

Title            DVP  
Name            POWERS, JAMES K.  
Address        201 E PINE STREET STE700  
City-State-Zip: ORLANDO FL

*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:** PATRICK MCGEE

**DIRECTOR**

**04/28/2015**

Electronic Signature of Signing Officer/Director Detail

Date