

**2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P01000045529

**Entity Name:** MOFFA, SUTTON, & DONNINI, P.A.

**Current Principal Place of Business:**

ONE FINANCIAL PLAZA  
100 S.E. 3RD AVENUE SUITE 2202  
FT LAUDERDALE, FL 33394

**Current Mailing Address:**

ONE FINANCIAL PLAZA  
100 S.E. 3RD AVENUE SUITE 2202  
FT LAUDERDALE, FL 33394 US

**FEI Number:** 65-1108096

**Certificate of Status Desired:** No

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

MOFFA, JOSEPH  
100 S.E. 3RD AVENUE  
STE 2202  
FORT LAUDERDALE, FL 33394 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 PD  
Name MOFFA, JOSEPH C  
Address ONE FINANCIAL PLAZA, STE 2202  
City-State-Zip: FT.LAUDERDALE FL 33394

Title VPD  
Name SUTTON, JAMES HJR  
Address 10627 BROADLAND PASS  
City-State-Zip: THONTOSASSA FL 33592

Title VP  
Name DONNINI, GERALD J  
Address ONE FINANCIAL PLAZA  
100 S.E. 3RD AVENUE SUITE 2202  
City-State-Zip: FT LAUDERDALE FL 33394

*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:** JOSEPH MOFFA

**PRESIDENT**

**01/14/2016**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date