

2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000085430

Entity Name: BANKER LOPEZ GASSLER P.A.**Current Principal Place of Business:**501 EAST KENNEDY BOULEVARD,
SUITE 1700
TAMPA, FL 33602**Current Mailing Address:**501 EAST KENNEDY BOULEVARD,
SUITE 1700
TAMPA, FL 33602 US**FEI Number:** 26-3339598**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**GASSLER, FRANK H
501 EAST KENNEDY BOULEVARD
SUITE 1700
TAMPA, FL 33602 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	PRESIDENT, DIRECTOR
Name	LOPEZ, JOSEPH K
Address	501 EAST KENNEDY BLVD. #1700
City-State-Zip:	TAMPA FL 33602

Title	VD
Name	GASSLER, FRANK H
Address	501 EAST KENNEDY BLVD. #1700
City-State-Zip:	TAMPA FL 33602

Title	VD
Name	POWERS, BRADLEY E
Address	501 EAST KENNEDY BLVD. #1700
City-State-Zip:	TAMPA FL 33602

Title	STD
Name	LOCKWOOD, DAVID C
Address	501 EAST KENNEDY BLVD. #1700
City-State-Zip:	TAMPA FL 33602

Title	VP, DIRECTOR
Name	KRENTZMAN, JOHN A
Address	501 E KENNEDY BLVD SUITE 1700
City-State-Zip:	TAMPA FL 33602

Title	VP/DIRECTOR
Name	KANTOR, ADAM
Address	501 EAST KENNEDY BOULEVARD, SUITE 1700
City-State-Zip:	TAMPA FL 33602

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 LOPEZ

PRESIDENT

02/13/2023

Electronic Signature of Signing Officer/Director Detail_____
Date