

2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000093338

Entity Name: THE PROPERTY ADVOCATES, P.A.**Current Principal Place of Business:**2525 PONCE DE LEON BLVD,
SUITE 600
CORAL GABLES, FL 33134**Current Mailing Address:**2525 PONCE DE LEON BLVD,
SUITE 600
CORAL GABLES, FL 33134 US**FEI Number:** 26-3531714**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**GASI LAW, P.A.
400 NORTH ASHLEY DRIVE, STE 1900
TAMPA, FL 33601 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 | PATTERSON, HUNTER |
| Address | 2525 PONCE DE LEON BLVD, SUITE 600 |
| City-State-Zip: | CORAL GABLES FL 33134 |

| | |
|-----------------|---------------------------------------|
| Title | DIRECTOR |
| Name | MENDIZABAL, CECILE |
| Address | 2525 PONCE DE LEON BLVD, SUITE 600 |
| City-State-Zip: | CORAL GABLES FL 33134 |

| | |
|-----------------|---------------------------------------|
| Title | TREASURER |
| Name | NARCHET, CHRISTOPHER |
| Address | 2525 PONCE DE LEON BLVD, SUITE 600 |
| City-State-Zip: | CORAL GABLES FL 33134 |

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: CECILE MENDIZABAL**DIRECTOR****04/10/2023**_____
Electronic Signature of Signing Officer/Director Detail_____
Date