Electronic Signature of Signing Officer/Director Detail

# 2021 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10000057632

Entity Name: MCDONALD TOOLE WIGGINS, P.A.

## **Current Principal Place of Business:**

111 N. MAGNOLIA AVENUE SUITE 1200 ORLANDO, FL 32801

### **Current Mailing Address:**

111 N. MAGNOLIA AVENUE SUITE 1200 ORLANDO, FL 32801 US

#### FEI Number: 27-3047341

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

TOOLE, M. GARY 111 N. MAGNOLIA AVENUE SUITE 1200 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

### **Officer/Director Detail :**

Title	D	Title	D
Name	TOOLE, M. GARY	Name	MCDONALD, FRANCIS MJR.
Address	111 N. MAGNOLIA AVENUE SUITE 1200	Address	111 N. MAGNOLIA AVENUE SUITE 1200
City-State-Zip:	ORLANDO FL 32801	City-State-Zip:	ORLANDO FL 32801
Title	D	Title	D
Name	WIGGINS, MICHAEL J	Name	RICHMAN, SCOTT A
Address	111 N. MAGNOLIA AVENUE SUITE 1200	Address	111 N. MAGNOLIA AVENUE SUITE 1200
City-State-Zip:	ORLANDO FL 32801	City-State-Zip:	ORLANDO FL 32801

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: M. GARY TOOLE

DIRECTOR / MANAGING 04/14/2021 PARTNER

Apr 14, 2021 Secretary of State 8569130232CC

Date

FILED

Certificate of Status Desired: No