

2021 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P13000088607

Entity Name: SIGNATURE MULTIFAMILY MANAGEMENT CORP.

Current Principal Place of Business:

5201 BROOK HOLLOW PARKWAY
SUITE A
NORCROSS, GA 30071

Current Mailing Address:

5201 BROOK HOLLOW PARKWAY
SUITE A
NORCROSS, GA 30071 US

FEI Number: 46-4844783

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 S PINE ISLAND RD
PLANTATION, FL 33324 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	P	Title	D
Name	SMITH, MICHAEL B	Name	SMITH, SCOTT H
Address	5201 BROOK HOLLOW PARKWAY SUITE A	Address	5201 BROOK HOLLOW PARKWAY SUITE A
City-State-Zip:	NORCROSS GA 30071	City-State-Zip:	NORCROSS GA 30071

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: MICHAEL B SMITH

BROKER

01/12/2021

Electronic Signature of Signing Officer/Director Detail

Date