

**2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P15000024214

**Entity Name:** T. A. BAIRD & SON, INC.

**Current Principal Place of Business:**

4342 HARTSOOK AVENUE  
NORTH PORT, FL 34287

**FILED**  
**Mar 30, 2016**  
**Secretary of State**  
**CC6864287488**

**Current Mailing Address:**

4342 HARTSOOK AVENUE  
NORTH PORT, FL 34287 US

**FEI Number:** 47-3401549

**Certificate of Status Desired:** No

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

STURGES, ERNEST W JR.  
701 JC CENTER COURT, SUITE 3  
PORT CHARLOTTE, FL 33954 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, T                 | Title           | VP S                 |
| Name            | BAIRD, TIMOTHY A     | Name            | THOMPSON, ANDREW R   |
| Address         | 4342 HARTSOOK AVENUE | Address         | 4342 HARTSOOK AVENUE |
| City-State-Zip: | NORTH PORT FL 34287  | City-State-Zip: | NORTH PORT FL 34287  |

*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:** TIMOTHY A. BAIRD

**PRESIDENT**

**03/30/2016**

Electronic Signature of Signing Officer/Director Detail

Date