

**2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P15000062336

**Entity Name:** STUART - LIPPMAN AND ASSOCIATES, INC.

**Current Principal Place of Business:**

5447 E. 5TH ST.  
# 110  
TUCSON, AZ 85711

**FILED**  
**Apr 15, 2020**  
**Secretary of State**  
**1757979466CC**

**Current Mailing Address:**

3850 N. CAUSEWAY BLVD.  
SUITE 200 C/O SESSIONS, FISHMAN, NATHAN, & ISRAEL  
METAIRIE, LA 70002 US

**FEI Number: 86-0841504**

**Certificate of Status Desired: No**

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

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301 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 SECRETARY, TREASURER  
Name CHALBERG, ERIC R  
Address 5447 E. 5TH ST.  
# 110  
City-State-Zip: TUCSON AZ 85711

Title DIRECTOR  
Name SACKS, STEPHEN O  
Address 5447 E. 5TH ST. # 110  
City-State-Zip: ARIZONA AZ 85711

Title COO, VP  
Name IAGO, MAC P  
Address 5447 E. 5TH ST. # 110  
City-State-Zip: TUCSON AZ 85711

Title PRESIDENT  
Name SPIVACK, STUART M  
Address 5447 E. 5TH ST. # 110  
City-State-Zip: ARIZONA AZ 85711

Title DIRECTOR  
Name TRAYNOR, DANIEL  
Address 5447 E 5TH ST STE 110  
City-State-Zip: TUCSON AZ 85711

*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: STUART SPIVACK**

**PRESIDENT**

**04/15/2020**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date