

**2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P22000023625

**Entity Name:** HAIRSTON & CROOKS LEGAL GROUP, INCORPORATED

**Current Principal Place of Business:**

66 WEST FLAGLER STREET  
SUITE 900  
MIAMI, FL 33130

**Current Mailing Address:**

66 WEST FLAGLER STREET  
SUITE 900  
MIAMI, FL 33130 US

**FEI Number:** 87-3777581

**Certificate of Status Desired:** No

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

REGISTERED AGENTS, INC.  
7901 4TH ST. N, STE 300  
APT. 912  
ST. PETERSBURG, FL 33702 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  
Name HAIRSTON, SHAWN L SR.  
Address 66 WEST FLAGLER STREET, SUITE 900  
City-State-Zip: MIAMI FL 33130

Title VP  
Name CROOKS, DUANE A  
Address 66 WEST FLAGLER, SUITE 900  
City-State-Zip: MIAMI FL 33130

Title TRES  
Name CROOKS, DUANE A  
Address 66 WEST FLAGLER STREET, SUITE 900  
City-State-Zip: MIAMI FL 33130

Title SEC  
Name HAIRSTON, SHAWN L SR.  
Address 66 WEST FLAGLER STREET  
City-State-Zip: MIAMI FL 33130

*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:** SHAWN HAIRSTON

**EQUITY PARTNER**

**04/30/2024**

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

\_\_\_\_\_  
Date