

**2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P96000011903

**Entity Name:** HALICZER, PETTIS & SCHWAMM, P.A.

**FILED**  
**Jan 15, 2020**  
**Secretary of State**  
**1339444736CC**

**Current Principal Place of Business:**

ONE FINANCIAL PLAZA  
SEVENTH FLOOR  
FT LAUDERDALE, FL 33394

**Current Mailing Address:**

ONE FINANCIAL PLAZA  
SEVENTH FLOOR  
FT LAUDERDALE, FL 33394 US

**FEI Number: 65-0641373**

**Certificate of Status Desired: No**

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

HALICZER, JAMES S  
ONE FINANCIAL PLAZA  
SEVENTH FLOOR  
FT LAUDERDALE, FL 33394 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 HALICZER, JAMES S  
Address ONE FINANCIAL PLAZA, SEVENTH FLOOR  
City-State-Zip: FT LAUDERDALE FL 33394

Title VP  
Name PETTIS, EUGENE K  
Address ONE FINANCIAL PLAZA, SEVENTH FLOOR  
City-State-Zip: FT LAUDERDALE FL 33394

Title VP  
Name SCHWAMM, RICHARD B  
Address 225 EAST ROBINSON ST.  
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: JAMES HALICZER**

**ADMINISTRATOR**

**01/15/2020**

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

\_\_\_\_\_  
Date