## 2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000103720

Entity Name: FRP DEVELOPMENT CORP.

**Current Principal Place of Business:** 

200 W. FORSYTH STREET 7TH FLOOR JACKSONVILLE, FL 32202

**FILED** Apr 30, 2014 **Secretary of State** CC9318510550

## **Current Mailing Address:**

200 W. FORSYTH STREET 7TH FLOOR JACKSONVILLE, FL 32202

FEI Number: 58-1794556 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

MILTON, JOHN DJR. 200 W. FORSYTH STREET, 7TH FLOOR JACKSONVILLE, FL 32202 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 DΡ Title DIRECTOR, VP, TREASURER,

SECRETARY DEVILLIERS, DAVID H Name

Name MILTON, JOHN DJR 34 LOVETON CIRCLE SUITE 200 Address

Address 200 W. FORSYTH STREET City-State-Zip: SPARKS MD 21152

7TH FLOOR

City-State-Zip: JACKSONVILLE FL 32202 Title **DIRECTOR CHAIRMAN CEO** 

BAKER, THOMPSON SII Title ASST. TREASURER, ASST. Name

**SECRETARY** Address 200 W. FORSYTH STREET, 7TH

Name KLOPFENSTEIN, JOHN D **FLOOR** 

Address 200 W. FORSYTH STREET, 7TH City-State-Zip: JACKSONVILLE FL 32202 **FLOOR** 

City-State-Zip: JACKSONVILLE FL 32202

Title COMPTROLLER TOLLEY, JOHN HJR Name

Address 34 LOVETON CIRCLE SUITE 200

City-State-Zip: SPARKS MD 21152

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.

Electronic Signature of Signing Officer/Director Detail