

**2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# S23363

**Entity Name:** STEVEN R. JACOB, P.A.

**Current Principal Place of Business:**

555 NORTH POINT CENTER EAST  
SUITE 400  
ALPHARETTA, GA 30022

**Current Mailing Address:**

555 NORTH POINT CENTER EAST  
SUITE 400  
ALPHARETTA, GA 30022 US

**FEI Number:** 65-0240481

**Certificate of Status Desired:** No

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

NORTHWEST REGISTERED AGENT, LLC.  
7901 4TH ST N STE 300  
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 D  
Name JACOB, STEVEN R.  
Address 555 NORTH POINT CENTER EAST  
City-State-Zip: ALPHARETTA GA 30022

*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:** STEVEN R JACOB

**DIRECTOR**

**01/24/2020**

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

\_\_\_\_\_  
Date