

**2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# V10779

**Entity Name:** HARRIS, GUIDI, ROSNER P.A.

**Current Principal Place of Business:**

ROBERT M. HARRIS  
1837 HENDRICKS AVENUE  
JACKSONVILLE, FL 32207

**Current Mailing Address:**

ROBERT M. HARRIS  
1837 HENDRICKS AVENUE  
JACKSONVILLE, FL 32207

**FEI Number:** 59-3103381

**Certificate of Status Desired:** No

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

HARRIS, ROBERT M.  
1837 HENDRICKS AVENUE  
JACKSONVILLE, FL 32207 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            HARRIS, ROBERT M  
Address        1837 HENDRICKS AVENUE  
City-State-Zip: JACKSONVILLE FL 32207

Title            D  
Name            ROSNER, ALAN E  
Address        1837 HENDRICKS AVENUE  
City-State-Zip: JACKSONVILLE FL 32207

Title            D  
Name            GUIDI, DENNIS E  
Address        1837 HENDRICKS AVENUE  
City-State-Zip: JACKSONVILLE FL 32207

*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:** ROBERT HARRIS

**DIRECTOR**

**03/19/2020**

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

\_\_\_\_\_  
Date