

**2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# V62217

**Entity Name:** BROUSSARD, CULLEN & BLASTIC, P.A.

**Current Principal Place of Business:**

800 N. MAGNOLIA AVE. SUITE 1301  
ORLANDO, FL 32803

**Current Mailing Address:**

800 N. MAGNOLIA AVE., SUITE 1301  
ORLANDO, FL 32803 US

**FEI Number:** 59-3140231

**Certificate of Status Desired:** Yes

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

BROUSSARD, MICHAEL  
800 N. MAGNOLIA AVE., SUITE 1301  
ORLANDO, FL 32803 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	PDT	Title	VDS
Name	BROUSSARD, MICHAEL	Name	CULLEN, KAREN J
Address	800 N. MAGNOLIA AVE., SUITE 1301	Address	800 N. MAGNOLIA AVE., SUITE 1301
City-State-Zip:	ORLANDO FL 32803	City-State-Zip:	ORLANDO FL 32803

*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:** MICHAEL BROUSSARD

**PRESIDENT**

**02/05/2018**

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

\_\_\_\_\_  
Date