

**2019 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F16000003509

**Entity Name:** MARTIN BAGWELL LUKE, P.C., CORP.

**Current Principal Place of Business:**

400 NORTHRIDGE ROAD, SUITE 1225  
ATLANTA, GA 30350

**Current Mailing Address:**

400 NORTHRIDGE ROAD, SUITE 1225  
ATLANTA, GA 30350 US

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** No

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

CORPORATION COMPANY OF ORLANDO  
300 SOUTH ORANGE AVENUE  
SUITE 1600 (JGH)  
ORLANDO, FL 32801 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 CP  
Name MARTIN, J. MARSHALL III  
Address 400 NORTHRIDGE ROAD, SUITE 1225  
City-State-Zip: ATLANTA GA 30350

Title VCVP  
Name BAGWELL, MITCHELL T  
Address 400 NORTHRIDGE ROAD, SUITE 1225  
City-State-Zip: ATLANTA GA 30350

Title DS  
Name LUKE, JIMMY C II  
Address 400 NORTHRIDGE ROAD, SUITE 1225  
City-State-Zip: ATLANTA GA 30350

*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:** J. MARSHALL MARTIN, III

**OFFICER**

**04/17/2019**

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

\_\_\_\_\_  
Date