

**2019 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F18000004477

**Entity Name:** BROUSE MCDOWELL, A LEGAL PROFESSIONAL ASSOCIATION, INC.**Current Principal Place of Business:**388 S. MAIN STREET STE 500,  
AKRON, OH 44311**Current Mailing Address:**388 S. MAIN STREET STE 500,  
AKRON, OH 44311 US**FEI Number: 34-1108723****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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	MERKLIN, MARC B
Address	388 S.MAIN STREET STE 500
City-State-Zip:	AKRON OH 44311

Title	VC
Name	GLESSNER, DANIEL
Address	388 S. MAIN STREET STE 500
City-State-Zip:	AKRON OH 44311

Title	D
Name	LEFFLER, AMANDA
Address	388 S. MAIN STREET STE 500
City-State-Zip:	AKRON OH 44311

Title	D
Name	SWING, CHRISTOPHER
Address	388 S. MAIN STREET STE 500
City-State-Zip:	AKRON OH 44311

Title	P
Name	MARC, MERKIN B
Address	388 S. MAIN STREET STE 500
City-State-Zip:	AKRON OH 44311

Title	VP
Name	GLESSNER, DANIEL
Address	388 S. MAIN STREET STE 500,
City-State-Zip:	AKRON OH 44311

Title	S
Name	HARRIS, RICHARD H
Address	388 S MAIN STREET STE 500
City-State-Zip:	AKRON FL 44311

Title	T
Name	HARGAS, NANCY
Address	388 S. MAIN STREET STE 500,
City-State-Zip:	AKRON OH 44311

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: MARC B. MERKLIN****PRESIDENT****07/09/2019**

Electronic Signature of Signing Officer/Director Detail

Date