

2023 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	CHAIRMAN
Name	GLESSNER, DANIEL K
Address	388 S.MAIN STREET STE 500
City-State-Zip:	AKRON OH 44311

Title	DIRECTOR
Name	HORBUS, CRAIG
Address	388 S. MAIN STREET STE 500
City-State-Zip:	AKRON OH 44311

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

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

Title	EXECUTIVE V.P.
Name	GAJDA, PATRICIA A.
Address	388 S. MAIN STREET STE 500,
City-State-Zip:	AKRON OH 44311

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

Title	DIRECTOR
Name	GAJDA, PATRICIA A.
Address	388 S. MAIN STREET STE 500
City-State-Zip:	AKRON OH 44311

Title	DIRECTOR
Name	MILLER, ANDREW W
Address	388 S. MAIN STREET STE 500,
City-State-Zip:	AKRON OH 44311

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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: KYLE WEIGAND**ASSISTANT SECRETARY** 04/26/2023

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title ASSISTANT SECRETARY
Name WEIGAND, KYLE
Address 388 S. MAIN STREET STE 500
City-State-Zip: AKRON OH 44311

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