

2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 140566

Entity Name: EMBASSY CORPORATION**Current Principal Place of Business:**2 FOUR ARTS PLAZA
PALM BEACH, FL 33480**Current Mailing Address:**2 FOUR ARTS PLZ
PALM BEACH, FL 33480 US**FEI Number:** 59-0294178**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**BRENEMAN, DAVID W
2 FOUR ARTS PLZ
PALM BEACH, FL 33480 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:** DAVID W. BRENEMAN

03/19/2018

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	CHAIRMAN	Title	TREASURER, ASST. SECRETARY, VC
Name	ELSON, SUZANNE	Name	DAVID, SCAFF
Address	2 FOUR ARTS PLZ	Address	2 FOUR ARTS PLZ
City-State-Zip:	PALM BEACH FL 33480	City-State-Zip:	PALM BEACH FL 33480
Title	SECRETARY	Title	VC
Name	GUBELMANN, WILLIAM S	Name	HOYT, BARRY
Address	2 FOUR ARTS PLZ	Address	2 FOUR ARTS PLZ
City-State-Zip:	PALM BEACH FL 33480	City-State-Zip:	PALM BEACH FL 33480
Title	P	Title	VC
Name	BRENEMAN, DAVID W	Name	GUTHRIE, RANDOLPH H
Address	2 FOUR ARTS PLZ	Address	2 FOUR ARTS PLAZA
City-State-Zip:	PALM BEACH FL 33480	City-State-Zip:	PALM BEACH FL 33480
Title	VC	Title	VC
Name	HENRY, PATRICK	Name	HASSEN, MELINDA
Address	2 FOUR ARTS PLZ	Address	2 FOUR ARTS PLZ
City-State-Zip:	PALM BEACH FL 33480	City-State-Zip:	PALM BEACH FL 33480

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: DAVID W. BRENEMAN**PRESIDENT**

03/19/2018

Electronic Signature of Signing Officer/Director Detail

Date