

2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 245355

Entity Name: FREDERICK DERR AND COMPANY, INCORPORATED**Current Principal Place of Business:**1451 MYRTLE STREET
SARASOTA, FL 34234**Current Mailing Address:**P.O. BOX 2719
SARASOTA, FL 34230 US**FEI Number:** 59-0915336**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**DERR, FREDERICK MC
1451 MYRTLE STREET
SARASOTA, FL 34234 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, CEO, DIRECTOR
Name DERR, FREDERICK M
Address 1451 MYRTLE STREET
City-State-Zip: SARASOTA FL 34234

Title PRESIDENT, DIRECTOR
Name RAVAZZOLI, KEITH A
Address 1451 MYRTLE STREET
City-State-Zip: SARASOTA FL 34234

Title VP, DIRECTOR
Name BARTLETT, WILLIAM
Address 1451 MYRTLE STREET
City-State-Zip: SARASOTA FL 34234

Title SECRETARY, DIRECTOR
Name FULTON, GEMMA M
Address 1451 MYRTLE STREET
City-State-Zip: SARASOTA FL 34234

Title ASST. SECRETARY, DIRECTOR
Name RUTH, THOMAS F
Address 1451 MYRTLE STREET
City-State-Zip: SARASOTA FL 34234

Title TREASURER
Name DERR, TERESA
Address 1451 MYRTLE STREET
City-State-Zip: SARASOTA FL 34234

Title VP, DIRECTOR
Name BONYNGE, RUSSELL D
Address 1451 MYRTLE STREET
City-State-Zip: SARASOTA FL 34234

Title DIRECTOR
Name ROGERS, RAYMOND L
Address 1451 MYRTLE STREET
City-State-Zip: SARASOTA FL 34234

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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: GEMMA M. FULTON**SECRETARY****04/04/2019**_____
Electronic Signature of Signing Officer/Director Detail_____
Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	CARTER, ROLAND L
Address	1451 MYRTLE STREET
City-State-Zip:	SARASOTA FL 34234