

**2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 308322

**FILED**  
**Jan 30, 2018**  
**Secretary of State**  
**CC1782251417**

**Entity Name:** DONALD W. MCINTOSH ASSOCIATES, INC.

**Current Principal Place of Business:**

2200 PARK AVENUE NORTH  
WINTER PARK, FL 32789-2355

**Current Mailing Address:**

2200 PARK AVENUE NORTH  
WINTER PARK, FL 32789-2355 US

**FEI Number:** 59-1151358

**Certificate of Status Desired:** Yes

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

MCINTOSH, DONALD WJR  
2200 PARK AVENUE NORTH  
WINTER PARK, FL 32789-2355 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            PRESIDENT, CEO  
Name            MCINTOSH, DONALD W. JR.  
Address        211 GENIUS DRIVE  
City-State-Zip: WINTER PARK FL 32789

Title            EXECUTIVE VP  
Name            FLORIO, JOHN M.  
Address        652 MAGNOLIA DRIVE  
City-State-Zip: ALTAMONTE SPRINGS FL 32701

Title            VP, CHIEF OF STAFF  
Name            HATCH, JANET B.  
Address        1655 COPPERLEAF COVE  
City-State-Zip: OVIEDO FL 32766

Title            SR. VP, CFO  
Name            NAUGLE, GREGORY M.  
Address        1150 WILLOWBROOK TRAIL  
City-State-Zip: MAITLAND FL 32751

Title            SR. VP  
Name            GROSSMAN, SCOTT E.  
Address        288 MACARTHUR PLACE  
City-State-Zip: MAITLAND FL 32751

Title            SR. VP  
Name            NEWTON, JEFFREY J.  
Address        825 PARKSIDE POINTE  
City-State-Zip: APOPKA FL 32712

Title            SR. VP  
Name            TOWNSEND, JOHN T.  
Address        964 GALWAY BLVD.  
City-State-Zip: APOPKA FL 32703

Title            SR. VP  
Name            WHITE, KIRBY L.  
Address        1000 CINNAMON FERN COURT  
City-State-Zip: CASSELBERRY FL 32707

**Continues on page 2**

*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:** DONALD W. MCINTOSH, JR.

**PRESIDENT, CEO**

**01/30/2018**

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

\_\_\_\_\_  
Date

**Officer/Director Detail Continued :**

Title VP  
Name CARSON, ROCKY L.  
Address 602 SOUTH RANGER BLVD.  
City-State-Zip: WINTER PARK FL 32792

Title VP  
Name ROBINSON, BEVERLY P.  
Address 505 TUDOR CIRCLE  
City-State-Zip: ALTAMONTE SPRINGS FL 32701