

2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 565338

Entity Name: KENNY NACHWALTER, P.A.**Current Principal Place of Business:**FOUR SEASONS TOWER
1441 BRICKELL AVENUE SUITE 1100
MIAMI, FL 33131**Current Mailing Address:**FOUR SEASONS TOWER
1441 BRICKELL AVENUE SUITE 1100
MIAMI, FL 33131 US**FEI Number:** 59-1796096**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**NACHWALTER, MICHAEL ESQ
FOUR SEASONS TOWER
1441 BRICKELL AVENUE SUITE 1100
MIAMI, FL 33131 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	P
Name	CRITCHLOW, RICHARD H
Address	1441 BRICKELL AVENUE SUITE 1100
City-State-Zip:	MIAMI FL 33131

Title	EVP
Name	ARNOLD, RICHARD A
Address	1441 BRICKELL AVENUE SUITE 1100
City-State-Zip:	MIAMI FL 33131

Title	EVP
Name	BLECHMAN, WILLIAM J
Address	1441 BRICKELL AVENUE SUITE 1100
City-State-Zip:	MIAMI FL 33131

Title	VP
Name	WAKSHLAG, STANLEY H
Address	1441 BRICKELL AVENUE SUITE 1100
City-State-Zip:	MIAMI FL 33131

Title	VP
Name	PERWIN, SCOTT E
Address	1441 BRICKELL AVENUE SUITE 1100
City-State-Zip:	MIAMI FL 33131

Title	COO
Name	SEYMOUR, THOMAS H
Address	1441 BRICKELL AVENUE SUITE 1100
City-State-Zip:	MIAMI FL 33131

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: THOMAS H. SEYMOUR**CHIEF OPERATING
OFFICER****02/21/2017**_____
Electronic Signature of Signing Officer/Director Detail_____
Date