

**2021 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 575188

**Entity Name:** PETERSON & MYERS, P.A.**Current Principal Place of Business:**225 EAST LEMON STREET  
SUITE 300  
LAKELAND, FL 33802**Current Mailing Address:**PO BOX 24628  
LAKELAND, FL 33802-4628 US**FEI Number:** 59-1832339**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**FISHER, BRIAN A  
225 EAST LEMON STREET  
SUITE 300  
LAKELAND, FL 33802 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:** BRIAN A FISHER

03/02/2021

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title        TREASURER, DIRECTOR  
Name        PUTERBAUGH, ROBERT E  
Address     6505 SUNSET RIDGE  
City-State-Zip: LAKELAND FL 33813

Title        ASST. TREASURER, DIRECTOR  
Name        ALEXANDER, MATTHEW D III  
Address     119 WYNDHAM DR  
City-State-Zip: WINTER HAVEN FL 33884

Title        ASST. SECRETARY, DIRECTOR  
Name        KNOWLTON, KEVIN C  
Address     1143 E. HIGHLAND DR.  
City-State-Zip: LAKELAND FL 33813

Title        ASST. SECRETARY, DIRECTOR  
Name        PAUL, EDWARD B  
Address     902 HANOVER WAY  
City-State-Zip: LAKELAND FL 33813

Title        ASST. SECRETARY, DIRECTOR  
Name        RUSTER, DEBORAH A  
Address     25 LOMA LINDA  
City-State-Zip: LAKELAND FL 33813

Title        ASST. SECRETARY, DIRECTOR  
Name        SENN, STEPHEN R  
Address     1805 LADY BOWERS TRAIL  
City-State-Zip: LAKELAND FL 33809

Title        VP, DIRECTOR  
Name        ASHLEY, KEVIN A  
Address     1410 CELEBRATION AVENUE  
              #201  
City-State-Zip: CELEBRATION FL 34747

Title        PRESIDENT, DIRECTOR, CEO  
Name        MILLER, DAVID A  
Address     1340 CRESCENT WOODS LOOP  
City-State-Zip: LAKELAND FL 33813

**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:** BRIAN A FISHERCFO/FIRM  
ADMINISTRATOR

03/02/2021

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title SECRETARY, DIRECTOR  
Name WADSWORTH, KEITH H  
Address 1013 SUNSET DRIVE  
City-State-Zip: LAKE WALES FL 33853

Title ASST. SECRETARY, DIRECTOR  
Name BROWN, JOSHUA K  
Address 185 LAKE TENNESSEE DRIVE  
City-State-Zip: AUBURNDALE FL 33823

Title ASST. TREASURER, DIRECTOR  
Name ALLEN, JOHN B (BART)  
Address 820 SOUTH NEW YORK AVE  
City-State-Zip: LAKELAND FL 33815

Title CFO/FIRM ADMINISTRATOR  
Name FISHER, BRIAN A  
Address 4908 DECKSIDE LOOP  
City-State-Zip: LAKELAND FL 33812

Title ASST. TREASURER, DIRECTOR  
Name FISHER, DAVID G  
Address 3391 HARBOR BEACH DRIVE  
City-State-Zip: LAKE WALES FL 33859

Title ASST. TREASURER, DIRECTOR  
Name HILL, CRAIG B  
Address 1252 LAKE POINT DRIVE  
City-State-Zip: LAKELAND FL 33813