

2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 600794

Entity Name: CARLTON FIELDS, P.A.**Current Principal Place of Business:**CORPORATE CENTER THREE AT INTL. PLAZA
4221 W. BOY SCOUT BLVD., STE. 1000
TAMPA, FL 33607**Current Mailing Address:**PO BOX 3239
TAMPA, FL 33601 US**FEI Number:** 59-1233896**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CF REGISTERED AGENT, INC.
100 S. ASHLEY DRIVE
SUITE 400
TAMPA, FL 33602 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, DIRECTOR
Name SASSO, GARY L.
Address 4221 W. BOY SCOUT BLVD.
SUITE 1000
City-State-Zip: TAMPA FL 33607

Title CHAIRMAN, DIRECTOR
Name PRATS, LUIS
Address 4221 W. BOY SCOUT BLVD.
SUITE 1000
City-State-Zip: TAMPA FL 33607

Title TREASURER
Name LEONARD, HYWEL
Address 4221 W. BOY SCOUT BLVD.
SUITE 1000
City-State-Zip: TAMPA FL 33607

Title SECRETARY, DIRECTOR
Name SPENCER, SUSAN L
Address 4221 W. BOY SCOUT BLVD.
SUITE 1000
City-State-Zip: TAMPA FL 33607

Title ASST. SECRETARY
Name KEANE, CRISTIN C
Address 4221 W. BOY SCOUT BLVD.
SUITE 1000
City-State-Zip: TAMPA FL 33607

Title ASST. TREASURER
Name LYONS, ELLEN K
Address 4221 W. BOY SCOUT BLVD.
SUITE 1000
City-State-Zip: TAMPA FL 33607

Title ASST. TREASURER
Name KASS, STEVEN
Address 100 SE SECOND STREET
SUITE 4200
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: GARY L. SASSO**PRESIDENT****02/26/2020**

Electronic Signature of Signing Officer/Director Detail

Date