

**2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 602454

**FILED**  
**Jan 15, 2020**  
**Secretary of State**  
**5711606536CC**

**Entity Name:** BRYANT MILLER OLIVE P.A.

**Current Principal Place of Business:**

101 NORTH MONROE STREET  
SUITE 900  
TALLAHASSEE, FL 32301

**Current Mailing Address:**

101 NORTH MONROE STREET  
SUITE 900  
TALLAHASSEE, FL 32301

**FEI Number:** 59-1315801

**Certificate of Status Desired:** Yes

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

REID, ROBERT C  
101 NORTH MONROE STREET  
SUITE 900  
TALLAHASSEE, FL 32301 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/D  
Name DUNLAP, GRACE E  
Address 201 NORTH FRANKLIN ST., SUITE 2700  
City-State-Zip: TAMPA FL 33602

Title VP/D  
Name SPRINGER, FREDERICK J  
Address 101 NORTH MONROE STREET SUITE 900  
City-State-Zip: TALLAHASSEE FL 32301

Title VP/D  
Name ARTIN, KENNETH R  
Address 255 SOUTH ORANGE AVE., SUITE 1350  
City-State-Zip: ORLANDO FL 32801

Title CFO  
Name MARCINKO, LEONARD T  
Address 430 MARGATE  
City-State-Zip: ATLANTA GA 30328

Title VP/D  
Name ROE, CHRISTOPHER B  
Address 101 NORTH MONROE STREET SUITE 900  
City-State-Zip: TALLAHASSEE FL 32301

Title VP/D  
Name SMITH, GEORGE A  
Address 101 NORTH MONROE STREET SUITE 900  
City-State-Zip: TALLAHASSEE FL 32301

*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:** LEONARD T. MARCINKO

**CFO**

**01/15/2020**

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

\_\_\_\_\_  
Date