2022 FLORIDA PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 24, 2022
Secretary of State
7532113948CC

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Entity Name: BOYD & JENERETTE, P.A.

Current Principal Place of Business:

201 NORTH HOGAN STREET
STE 400
JACKSONVILLE, FL 32202-0372

Current Mailing Address:

201 NORTH HOGAN STREET
STE 400
JACKSONVILLE, FL 32202-0372

FEI Number: 59-1484000

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SCHRADER, III, ROBERT E
201 NORTH HOGAN STREET STE 400
JACKSONVILLE, FL 32202 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	SECRETARY, DIRECTOR	Title	VP, DIRECTOR
Name	SCHRADER, ROBERT EIII	Name	ECKELS, MARK K
Address	201 NORTH HOGAN STREET STE 400	Address	201 NORTH HOGAN STREET STE 400
City-State-Zip:	JACKSONVILLE FL 32202-0372	City-State-Zip:	JACKSONVILLE FL 32202-0372
Title	PRESIDENT, DIRECTOR	Title	TREASURER, VP, DIRECTOR
Name	SAMUELS, BENFORD LJR.	Name	VANDERLINDE, KRISTEN M
Address	201 NORTH HOGAN STREET STE 400	Address	201 NORTH HOGAN STREET STE 400
City-State-Zip:	JACKSONVILLE FL 32202-0372	City-State-Zip:	JACKSONVILLE FL 32202-0372
Title	VP, DIRECTOR	Title	VP/DIRECTOR
Name	ANDERSON, JANE	Name	SCHULMAN, BETH
Address	201 NORTH HOGAN STREET STE 400	Address	201 NORTH HOGAN STREET STE 400
City-State-Zip:	JACKSONVILLE FL 32202-0372	City-State-Zip:	JACKSONVILLE FL 32202-0372
Title	VP/DIRECTOR	Title	VP/DIRECTOR
Name	GOODEN, KANSAS	Name	OUGHTON, KATHRYN M
Address	201 NORTH HOGAN STREET STE 400	Address	201 NORTH HOGAN STREET STE 400
City-State-Zip:	JACKSONVILLE FL 32202-0372	City-State-Zip:	JACKSONVILLE FL 32202-0372

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: ROBERT SCHRADER III SECRETARY, DIRECTOR 01/24/2022

Electronic Signature of Signing Officer/Director Detail — Date