

2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 692709

FILED
Apr 28, 2016
Secretary of State
CC3796660584

Entity Name: SMITH HULSEY & BUSEY, PROFESSIONAL ASSOCIATION

Current Principal Place of Business:

225 WATER STREET
SUITE 1800
JACKSONVILLE, FL 32202

Current Mailing Address:

225 WATER STREET
SUITE 1800
JACKSONVILLE, FL 32202

FEI Number: 59-2100518

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

KUNTZ, WILLIAM E.
225 WATER STREET
SUITE 1800
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 DPC
Name BUSEY, STEPHEN D
Address 225 WATER STREET
SUITE 1800
City-State-Zip: JACKSONVILLE FL 32202

Title DVP
Name KUNTZ, WILLIAM E
Address 4744 PRINCE EDWARD RD.
City-State-Zip: JACKSONVILLE FL 32210

Title DIRECTOR, VP
Name LEWIS, M. RICHARD JR.
Address 4949 VANDIVEER RD.
City-State-Zip: JACKSONVILLE FL 32210

Title T
Name BUSEY, JEAN M
Address 225 WATER ST
STE 1800
City-State-Zip: JACKSONVILLE FL 32202

Title DIRECTOR, VP, SECRETARY
Name MOORE, STEPHEN D JR.
Address 225 WATER ST
STE 1800
City-State-Zip: JACKSONVILLE FL 32202

Title DIRECTOR, VP
Name DEMONT, MICHAEL E
Address 225 WATER STREET
SUITE 1800
City-State-Zip: JACKSONVILLE FL 32202

Title VP, DIRECTOR
Name PUTNAL, BRYAN L
Address 225 WATER STREET
SUITE 1800
City-State-Zip: JACKSONVILLE FL 32202

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: STEPHEN D. MOORE, JR.

SECRETARY

04/28/2016

Electronic Signature of Signing Officer/Director Detail

Date