

2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT

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Mar 07, 2013
Secretary of State
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Entity Name: DEAN, MEAD, EGERTON, BLOODWORTH, CAPOUANO & BOZARTH, P.A.

Current Principal Place of Business:

800 NORTH MAGNOLIA AVENUE
SUITE 1500
ORLANDO, FL 32803

Current Mailing Address:

P.O. BOX 2346
ORLANDO, FL 32802 US

FEI Number: 59-2049716

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

DEAN MEAD SERVICES ,LLC
800 N. MAGNOLIA AVE.
SUITE 1500
ORLANDO, FL 32803 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 D, PRESIDENT
Name CHAPMAN, MARC D
Address 800 N. MAGNOLIA AVE.
SUITE 1500
City-State-Zip: ORLANDO FL 32803

Title D, VP, SECRETARY
Name MOONEY, NICHOLE M
Address 800 NORTH MAGNOLIA AVENUE
SUITE 1500
City-State-Zip: ORLANDO FL 32803

Title D, VP, TREASURER
Name LEE, STEVEN C
Address 800 NORTH MAGNOLIA AVENUE
SUITE 1500
City-State-Zip: ORLANDO FL 32803

Title D, VP
Name MINTON, MICHAEL D
Address 1903 SOUTH 25TH ST.
SUITE 200
City-State-Zip: FORT PIERCE FL 34947

Title D, VP
Name MEAD, ROBERT W JR.
Address 800 NORTH MAGNOLIA AVENUE
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City-State-Zip: ORLANDO FL 32803

Title D, VP
Name LOONEY, STEPHEN R
Address 800 NORTH MAGNOLIA AVENUE
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City-State-Zip: ORLANDO FL 32803

Title D, VP
Name AHEARN, MATTHEW J
Address 800 NORTH MAGNOLIA AVENUE
SUITE 1500
City-State-Zip: ORLANDO FL 32803

Title D, VP
Name GRAVENMIER, STANLEY A
Address 800 NORTH MAGNOLIA AVENUE
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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: STEVEN C. LEE

VICE PRESIDENT

03/07/2013

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title D, VP
Name REZANKA, KIMBERLY B
Address 8240 DEVEREUX DR.
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City-State-Zip: VIERA FL 32940

Title VP
Name AKINS, DAVID J
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