

**2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F20426

**Entity Name:** FRAZIER & FRAZIER, ATTORNEYS AT LAW, P.A.

**Current Principal Place of Business:**

1515 RIVERSIDE AVE, SUITE A  
JACKSONVILLE, FL 32204

**Current Mailing Address:**

1515 RIVERSIDE AVE, SUITE A  
JACKSONVILLE, FL 32204

**FEI Number:** 59-2056064

**Certificate of Status Desired:** No

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

FRAZIER, W. ROBINSON  
1515 RIVERSIDE AVE, SUITE A  
JACKSONVILLE, FL 32204 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 PTSD  
Name FRAZIER, W. ROBINSON  
Address 1515 RIVERSIDE AVENUE, SUITE A  
City-State-Zip: JACKSONVILLE FL 32204

*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:** W. ROBINSON FRAZIER

PTSD

01/20/2014

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

\_\_\_\_\_  
Date