

**2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F74129

**FILED  
Jan 21, 2014  
Secretary of State  
CC0854244619**

**Entity Name:** DICKENSON, REX AND SLOAN, P.A.

**Current Principal Place of Business:**

150 E. PALMETTO PARK RD.,  
500  
BOCA RATON, FL 33432

**Current Mailing Address:**

150 E. PALMETTO PARK RD.,  
500  
BOCA RATON, FL 33432 US

**FEI Number:** 59-2180007

**Certificate of Status Desired:** No

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

DICKENSON, DAVID B.  
150 EAST PALMETTO PARK ROAD  
500  
BOCA RATON, FL 33432 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 PD  
Name DICKENSON, DAVID B  
Address 150 E. PALMETTO PARK RD., STE 500  
City-State-Zip: BOCA RATON FL 33432

Title VPD  
Name REX, ROBERT H  
Address 150 E. PALMETTO PARK RD., STE 500  
City-State-Zip: BOCA RATON FL 33432

Title STD  
Name SLOAN, BARBARA A  
Address 150 E. PALMETTO PARK RD., STE 500  
City-State-Zip: BOCA RATON FL 33432

*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:** BARBARA A. SLOAN

**SEC/TREAS.**

**01/21/2014**

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