

**2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# J21790

**FILED**  
**Jan 23, 2013**  
**Secretary of State**  
**CC8629219542**

**Entity Name:** EBERT NORMAN BRADY ARCHITECTS PA

**Current Principal Place of Business:**

1361 13TH AVENUE S.  
SUITE 230  
JACKSONVILLE BEACH, FL 32250

**Current Mailing Address:**

1361 13TH AVENUE S.  
SUITE 230  
JACKSONVILLE BEACH, FL 32250 US

**FEI Number: 59-2722686**

**Certificate of Status Desired: Yes**

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

RICHARD G. HATHAWAY, P.A.  
115 PROFESSIONAL DRIVE  
SUITE 101  
PONTE VEDRA BEACH, FL 32082 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 DP  
Name EBERT, WILLIAM P  
Address 2303 FIDDLERS LN  
City-State-Zip: ATLANTIC BEACH FL 32233

Title VP  
Name NORMAN, JOHN T  
Address 2889 ST. JOHNS BOULEVARD  
City-State-Zip: JACKSONVILLE BEACH FL 32250

Title VP  
Name BRADY, SCOTT A  
Address 211 CANAL BLVD  
City-State-Zip: PONTE VEDRA BEACH FL 32082

*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: WILLIAM P.J. EBERT**

**PRINCIPAL**

**01/23/2013**

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

\_\_\_\_\_  
Date