### 2021 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J80135

Entity Name: CALER, DONTEN, LEVINE, COHEN, PORTER & VEIL, P.A.

**FILED** Apr 28, 2021 Secretary of State 8228773331CC

# **Current Principal Place of Business:**

505 SOUTH FLAGLER DRIVE

SUITE 900

WEST PALM BEACH, FL 33401

## **Current Mailing Address:**

505 SOUTH FLAGLER DRIVE SUITE 900

WEST PALM BEACH, FL 33401 US

FEI Number: 59-2831281 Certificate of Status Desired: No

# Name and Address of Current Registered Agent:

CALER, WILLIAM K JR. 505 SOUTH FLAGLER DRIVE SUITE 900 WEST PALM BEACH, FL 33401 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: WILLIAM K CALER JR. 04/28/2021

> Date Electronic Signature of Registered Agent

#### Officer/Director Detail:

Title VP. DIRECTOR Title VP, DIRECTOR Name DONTEN, DAVID S Name LEVINE, JOEL H

2334 PALM HARBOUR DR 222 LAKEVIEW AVENUE Address Address

PH3 PALM BEACH GARDENS FL 33410

City-State-Zip: City-State-Zip:

Title VP, DIRECTOR Title VP, DIRECTOR

VEIL, MARK D Name Name PORTER, SCOTT L

Address 107 WOODSMUIR COURT Address 14211 LITTLE CYPRESS CIRCLE

City-State-Zip: PALM BCH GARDENS FL 33418 City-State-Zip: PALM BEACH GARDENS FL 33410

Title SECRETARY, DIRECTOR Title PRESIDENT, DIRECTOR Name CALER, WILLIAM K JR.

Name COHEN, LOUIS M

Address 234 DYER RD Address 732 SANDY POINT LANE

City-State-Zip: WEST PALM BEACH FL 33405 PALM BEACH GARDENS FL 33410 City-State-Zip:

Title VP. TREASURER Title VΡ

Name MULLEN, JAMES F IV Name PENCE, THOMAS A

2904 NORTH MILLER DRIVE Address Address 7535 SE FOREST OAK LANE City-State-Zip: PALM BEACH GARDENS FL 33410

HOBE SOUND FL 33455 City-State-Zip:

#### Continues on page 2

WEST PALM BEACH FL 33401

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.

04/28/2021 SIGNATURE: JAMES MULLEN VP, TREASURER

## Officer/Director Detail Continued:

Title VP

Name HUTCHISON, JAMES B

Address 625 PILOT ROAD

City-State-Zip: NORTH PALM BEACH FL 33408

Title VP

Name CLARK, LAURA E

Address 170 ISLE VERDE WAY

City-State-Zip: PALM BEACH GARDENS FL 33418

Title VP

Name MANGAN, PATRICK E.
Address 240 BLUEJAY LANE
City-State-Zip: JUPITER FL 33458

Title VP

Name NALEZYTY, MICHAEL J

Address 800 JEFFREY STREET

#111

City-State-Zip: BOCA RATON FL 33487

Title VP

Name WOODS, MARTIN

Address 1303 SW HEATHER TERRACE

City-State-Zip: STUART FL 34994