

**2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# K54578

**Entity Name:** WRIGHT, FULFORD, MOORHEAD & BROWN, P.A.

**Current Principal Place of Business:**

505 MAITLAND AVE.  
SUITE 1000  
ALTAMONTE SPRINGS, FL 32701

**Current Mailing Address:**

505 MAITLAND AVE.  
SUITE 1000  
ALTAMONTE SPRINGS, FL 32701

**FEI Number:** 59-2924905

**Certificate of Status Desired:** No

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

WRIGHT, D. FRANKLIN  
505 MAITLAND AVE.  
SUITE 1000  
ALTAMONTE SPRINGS, FL 32701 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:** D. FRANK WRIGHT

05/21/2020

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title PD  
Name BROWN, CURTIS L  
Address 505 MAITLAND AVE.  
City-State-Zip: ALTAMONTE SPRINGS FL 32701

Title VD  
Name MOORHEAD, TIMOTHY R  
Address 505 MAITLAND AVE., SUITE 1000  
City-State-Zip: ALTAMONTE SPRINGS FL 32701

Title VSD  
Name WRIGHT, D FRANK  
Address 505 MAITLAND AVE STE 1000  
City-State-Zip: ALTAMONTE SPRINGS FL 32701

*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:** WRIGHT , D FRANK

**SECRETARY**

05/21/2020

Electronic Signature of Signing Officer/Director Detail

Date