

2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L23601

Entity Name: SAALFIELD SHAD, P.A.

Current Principal Place of Business:

245 RIVERSIDE AVENUE
SUITE 400
JACKSONVILLE, FL 32202

Current Mailing Address:

245 RIVERSIDE AVENUE
SUITE 400
JACKSONVILLE, FL 32202

FEI Number: 59-2972592

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

STOKES, JOSEPH B
245 RIVERSIDE AVENUE
SUITE 400
JACKSONVILLE, FL 32202 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 PRESIDENT, DIRECTOR
Name STOKES, JOSEPH B III
Address 4651 ARAPAHOE AVE
City-State-Zip: JACKSONVILLE FL 32210

Title VICE-PRESIDENT, DIRECTOR
Name INCLAN, CLEMENTE J
Address 2839 WOODVALLEY COURT
City-State-Zip: JACKSONVILLE FL 32217

Title DIRECTOR
Name ERICKSON, TRAVASE L.
Address 129 WAVERLY WAY
City-State-Zip: SAINT JOHNS FL 32259

Title DIRECTOR
Name BIRD, SUSAN M.
Address 2226 LAKESHORE BLVD.
City-State-Zip: JACKSONVILLE FL 32203

Title DIRECTOR
Name COLE, BLAKE H.
Address 3863 MICHAELS LANDING CIRCLE E
City-State-Zip: JACKSONVILLE FL 32224

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: JOSEPH B. STOKES, III

PRESIDENT

04/12/2024

Electronic Signature of Signing Officer/Director Detail

Date