

**2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# L36702

**Entity Name:** COUNTRYMAN & ASSOCIATES, P.A., CPA

**Current Principal Place of Business:**

13902 N DALE MABRY HWY  
SUITE 240  
TAMPA, FL 33618-2428

**Current Mailing Address:**

13902 N DALE MABRY HWY  
SUITE 240  
TAMPA, FL 33618-2428 US

**FEI Number:** 59-2981184

**Certificate of Status Desired:** No

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

COUNTRYMAN, JOHN A  
13902 N DALE MABRY HWY  
SUITE 240  
TAMPA, FL 33618-2428 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           DPS  
Name           COUNTRYMAN, JOHN A  
Address        13902 N DALE MABRY HWY  
                  SUITE 240  
City-State-Zip: TAMPA FL 33618-2428

*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:** JOHN COUNTRYMAN

**PRESIDENT**

**04/21/2023**

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

\_\_\_\_\_  
Date