

**2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# L47163

**Entity Name:** JOSEPH D. MITCHELL, P.A.

**Current Principal Place of Business:**

2123 CENTRE POINTE BLVD.  
TALLAHASSEE, FL 32308

**Current Mailing Address:**

2123 CENTRE POINTE BLVD.  
TALLAHASSEE, FL 32308 US

**FEI Number:** 59-2970754

**Certificate of Status Desired:** Yes

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

RICHARDS, STEVEN R  
2123 CENTRE POINTE BLVD.  
TALLAHASSEE, FL 32308 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:** STEVEN R RICHARDS

01/07/2015

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            RICHARDS, STEVEN R  
Address        2123 CENTRE POINTE BLVD.  
City-State-Zip: TALLAHASSEE FL 32308

Title            VP  
Name            CROSS, STACY R  
Address        2123 CENTRE POINTE BLVD.  
City-State-Zip: TALLAHASSEE FL 32308

Title            SECRETARY  
Name            WILLIAMS, BEVERLY H  
Address        2123 CENTRE POINTE BLVD.  
City-State-Zip: TALLAHASSEE FL 32308

Title            TREASURER  
Name            BROCK, DAISEY G  
Address        2123 CENTRE POINTE BLVD.  
City-State-Zip: TALLAHASSEE FL 32308

*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:** STEVEN R RICHARDS

PRESIDENT

01/07/2015

Electronic Signature of Signing Officer/Director Detail

Date