2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L77107

Entity Name: GWYNN, MOORE & ASSOCIATES, INC.

FILED
Apr 01, 2019
Secretary of State
1299485906CC

Current Principal Place of Business:

C/O JOSEPH P. MOORE 101 SE 6TH AVE-F DELRAY BEACH, FL 33483

Current Mailing Address:

C/O JOSEPH P. MOORE 101 SE 6TH AVE-F DELRAY BEACH, FL 33483

FEI Number: 65-0199595 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MOORE, JOSEPH P 101 SE 6TH AVE, STE F DELRAY BEACH, FL 33483 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 PDT Title VPSD

Name MOORE, JOSEPH P Name MOORE, KELLEY

Address 4545 N. BARWICK RANCH CIRCLE Address 4545 N. BARWICK RANCH CIRCLE

City-State-Zip: DELRAY BEACH FL 33445 City-State-Zip: DELRAY BEACH FL 33445

Title D Title D

Name MOORE, EDWIN LJR Name MOORE, EDWIN LIII

Address 1726 GRAY RD. Address 1861 OLIVER BRIDGE ROAD

City-State-Zip: CHATTANOOGA TN 37421 City-State-Zip: WATKINSVILLE GA 30677

Title D Title DIRECTOR

Name HARTSEL, PATTI N Name MOORE, JONAH P
Address 93 DUNE LAKES CIRCLE Address 2104 LINARI WAY

J208 City-State-Zip: WAXHAW NC 28173

City-State-Zip: SANTA ROSA BEACH FL 32459

Title DIRECTOR

 Name
 MOORE, JASON D.
 Address
 Address
 2104 LINARI WAY

 Address
 2104 LINARI WAY
 City-State-Zip:
 WAXHAW NC 28173

City-State-Zip: WAXHAW NC 28173

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 MOORE PRESIDENT 04/01/2019