

**2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# L83386

**Entity Name:** VAN MIDDLESWORTH AND COMPANY, P.A.

**Current Principal Place of Business:**

GUY VAN MIDDLESWORTH  
678 FOURTH STREET NORTH  
ST. PETERSBURG, FL 33701

**Current Mailing Address:**

GUY VAN MIDDLESWORTH  
678 FOURTH STREET NORTH  
ST. PETERSBURG, FL 33701

**FEI Number: 59-3026738**

**Certificate of Status Desired: No**

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

VANMIDDLESWORTH, GUY  
678 FOURTH STREET NORTH  
ST. PETERSBURG, FL 33701 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 PD  
Name VAN MIDDLESWORTH, GUY G  
Address 678- 4TH STREET NORTH  
City-State-Zip: SAINT PETERSBURG FL 33701

Title TD  
Name VAN MIDDLESWIRTH, CHARLES E  
Address 678- 4TH STREET NORTH  
City-State-Zip: SAINT PETERSBURG FL 33701

Title SD  
Name VAN MIDDLESWORTH, JILL M  
Address 678 - 4TH STREET NORTH  
City-State-Zip: SAINT PETERSBURG FL 33701

*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: GUY VAN MIDDLESWORTH**

**PD**

**02/02/2017**

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

\_\_\_\_\_  
Date