

**2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# M96095

**Entity Name:** HUNTON BRADY ARCHITECTS, P.A.

**Current Principal Place of Business:**

800 N MAGNOLIA AVE  
SUITE 600  
ORLANDO, FL 32803

**Current Mailing Address:**

800 N MAGNOLIA AVE  
SUITE 600  
ORLANDO, FL 32803

**FEI Number:** 59-2910866

**Certificate of Status Desired:** Yes

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

COLE, CHARLES WJR  
800 N MAGNOLIA AVE, STE 600  
ORLANDO, FL 32803 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 P  
Name COLE, CHARLES WJR  
Address 800 N. MAGNOLIA AVE, STE 600  
City-State-Zip: ORLANDO FL 32803

Title VPS  
Name MASO, MAURIZIO J  
Address 800 N MAGNOLIA AVE, STE 600  
City-State-Zip: ORLANDO FL 32803

Title VP  
Name SEXTON, ANDREW  
Address 800 N MAGNOLIA AVE, STE 600  
City-State-Zip: ORLANDO FL 32803

Title VPT  
Name BELFLOWER, STEPHEN  
Address 800 N. MAGNOLIA, STE 600  
City-State-Zip: ORLANDO FL 32803

*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:** CHARLES W. COLE, JR

**PRESIDENT**

**02/17/2015**

Electronic Signature of Signing Officer/Director Detail

Date