

2018 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:**BELFLOWER, STEPHEN W PRESIDENT
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:** STEPHEN W BELFLOWER

01/10/2018

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

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

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

Title	VP, TREASURER
Name	BRAITHWAITE, JOHN GREGORY
Address	800 N MAGNOLIA AVE SUITE 600
City-State-Zip:	ORLANDO FL 32803

Title	VP
Name	MACHESKE, PAUL
Address	800 N MAGNOLIA AVE SUITE 600
City-State-Zip:	ORLANDO FL 32803

Title	ASSOCIATE PRINCIPAL
Name	GORDON, DANIEL E
Address	800 N MAGNOLIA AVE SUITE 600
City-State-Zip:	ORLANDO FL 32803

Title	ASSOCIATE PRICIPAL
Name	POSADO, AURELIO
Address	800 N MAGNOLIA AVE SUITE 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: STEPHEN W BELFLOWER

PRESIDENT

01/10/2018

Electronic Signature of Signing Officer/Director Detail

Date