

2015 FLORIDA PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P02000125102

Entity Name: FLORIDA CAPITAL GROUP, INC.

FILED
Oct 28, 2015
Secretary of State
CR2821089560

Current Principal Place of Business:

10151 DEERWOOD PARK BLVD.
BLDG. 100, SUITE 410
JACKSONVILLE, FL 32256

Current Mailing Address:

10151 DEERWOOD PARK BLVD.
BLDG. 100, SUITE 410
JACKSONVILLE, FL 32256

FEI Number: 33-1032726

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CULPEPPER, BRUCE ESQ
101 EAST KENNEDY BLVD
STE 2380
TAMPA, FL 33602 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: /BRUCE CULPEPPER

10/28/2015

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title SVP
Name HIGEL, BOB
Address 10151 DEERWOOD PARK BLVD, BLDG
100, SUITE
City-State-Zip: JACKSONVILLE FL 32259

Title D
Name CULPEPPER, BRUCE P
Address 106 E COLLEGE AVE, SUITE 1200
City-State-Zip: TALLAHASSEE FL 32301

Title D
Name DOSTIE, RICHARD R
Address 9301 OLD KINGS ROAD SOUTH
City-State-Zip: JACKSONVILLE FL 32257

Title PD
Name JONES, MALCOLM J JR
Address 10151 DEERWOOD PARK BLVD
City-State-Zip: JACKSONVILLE FL 32256

Title D
Name KRUSEN, ANDREW W JR
Address 712 SOUTH OREGON AVE, SUITE 200
City-State-Zip: TAMPA FL 33606

Title VP
Name VENTRONE, BOB
Address 10151 DEERWOOD PARK BLVD.
BLDG. 100, SUITE 410
City-State-Zip: JACKSONVILLE FL 32256

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: /BRUCE CULPEPPER

ATTORNEY

10/28/2015

Electronic Signature of Signing Officer/Director Detail

Date