

**2022 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P04000025559

**Entity Name:** STEPHEN H. GREENBERG & ASSOCIATES, INC.

**FILED**  
**Apr 14, 2022**  
**Secretary of State**  
**3929555084CC**

**Current Principal Place of Business:**

1625 NORTH COMMERCE PARKWAY  
SUITE 215  
WESTON, FL 33326

**Current Mailing Address:**

1625 NORTH COMMERCE PARKWAY  
SUITE 215  
WESTON, FL 33326 US

**FEI Number: 20-0731883**

**Certificate of Status Desired: No**

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

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301 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           DIRECTOR, CHAIRMAN, TREASURER  
Name           SKINNER, MARK M.  
Address        99 WOOD AVE SOUTH  
                  SUITE 501  
City-State-Zip: ISELIN NJ 08830

Title           CHIEF FINANCIAL OFFRICER,  
                  DIRECTOR  
Name           RIORDAN, MATTHEW G.  
Address        99 WOOD AVE SOUTH  
                  SUITE 501  
City-State-Zip: ISELIN NJ 08830

Title           PRESIDENT  
Name           GREENBERG, STEPHEN H.  
Address        1625 NORTH COMMERCE PARKWAY  
                  SUITE 215  
City-State-Zip: WESTON FL 33326

Title           SENIOR VICE PRESIDENT,  
                  SECRETARY  
Name           PIERRE, JACQUES S  
Address        1625 NORTH COMMERCE PARKWAY  
                  SUITE 215  
City-State-Zip: WESTON FL 33326

Title           VC, DIRECTOR  
Name           SCHNEIDER, MEGAN  
Address        1625 NORTH COMMERCE PARKWAY  
                  SUITE 215  
City-State-Zip: WESTON FL 33326

*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: JACQUES S. PIERRE**

**SECRETARY**

**04/14/2022**

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

\_\_\_\_\_  
Date