

**2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P10000058942

**Entity Name:** HOLSONBACKLAW, P.A.

**Current Principal Place of Business:**

400 NORTH ASHLEY DRIVE  
SUITE 2600  
TAMPA, FL 33602

**Current Mailing Address:**

400 NORTH ASHLEY DRIVE  
SUITE 2600  
TAMPA, FL 33602 US

**FEI Number:** 27-3097449

**Certificate of Status Desired:** No

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

HOLSONBACK, JOHN P  
400 NORTH ASHLEY DRIVE  
SUITE 2600  
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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title           PTD  
Name           HOLSONBACK, JOHN P  
Address       2414 OAK LANDING DRIVE  
City-State-Zip: BRANDON FL 33511

*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:** JOHN HOLSONBACK

**PRESIDENT**

**04/26/2017**

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

\_\_\_\_\_  
Date