

**2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P11000004740

**Entity Name:** JOSEPH N. ALEXANDER, P.A.

**Current Principal Place of Business:**

511 WEST BAY STREET  
SUITE 350  
TAMPA, FL 33606

**Current Mailing Address:**

511 WEST BAY STREET  
SUITE 350  
TAMPA, FL 33606 US

**FEI Number:** 27-4550762

**Certificate of Status Desired:** No

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

ALEXANDER, JOSEPH N  
511 WEST BAY STREET  
SUITE 350  
TAMPA, FL 33606 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            D, P  
Name            ALEXANDER, JOSEPH N  
Address        511 WEST BAY STREET  
                  SUITE 350  
City-State-Zip: TAMPA FL 33606

Title            VPST  
Name            ALEXANDER, JOSEPH N  
Address        511 WEST BAY STREET  
                  SUITE 350  
City-State-Zip: TAMPA FL 33606

*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:** JOSEPH N. ALEXANDER

**PRESIDENT**

**01/26/2015**

Electronic Signature of Signing Officer/Director Detail

Date