

2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P11000036954

Entity Name: WILLIAM E. BARFIELD, P.A.

Current Principal Place of Business:

225 S. WESTMONTE DRIVE SUITE 2040
ALTAMONTE SPRINGS, FL 32714

Current Mailing Address:

225 S. WESTMONTE DRIVE SUITE 2040
ALTAMONTE SPRINGS, FL 32714 US

FEI Number: 45-1986851

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BARFIELD, WILLIAM E
225 S. WESTMONTE DRIVE SUITE 2040
ALTAMONTE SPRINGS, FL 32714 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	P	Title	S, T
Name	BARFIELD, WILLIAM E	Name	BARFIELD, WILLIAM E
Address	225 S. WESTMONTE DRIVE SUITE 2040	Address	225 S. WESTMONTE DRIVE SUITE 2040
City-State-Zip:	ALTAMONTE SPRINGS FL 32714	City-State-Zip:	ALTAMONTE SPRINGS FL 32714

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: WILLIAM BARFIELD

PRESIDENT

04/26/2024

Electronic Signature of Signing Officer/Director Detail

Date