

2022 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P12000072494

Entity Name: FOF PA II, INC.**Current Principal Place of Business:**800 NORTH MAGNOLIA AVENUE
SUITE 1100
ORLANDO, FL 32803**Current Mailing Address:**800 NORTH MAGNOLIA AVENUE
SUITE 1100
ORLANDO, FL 32803**FEI Number:** 46-0842981**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**DUSTI, LORNA
800 NORTH MAGNOLIA AVENUE
SUITE 1100
ORLANDO, FL 32803 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:** LORNA DUSTI

04/07/2022

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title VP
Name ROGERS, DAVID
Address 800 NORTH MAGNOLIA AVENUE
SUITE 1100
City-State-Zip: ORLANDO FL 32803

Title CHAIRMAN
Name SCHWARTZ, DANIEL
Address 800 N. MAGNOLIA AVE
STE 1100
City-State-Zip: ORLANDO FL 32803

Title DIRECTOR
Name IAROSSE, TOM
Address 800 NORTH MAGNOLIA AVENUE
SUITE 1100
City-State-Zip: ORLANDO FL 32803

Title DIRECTOR
Name RIPIN, A.J.
Address 800 NORTH MAGNOLIA AVENUE
SUITE 1100
City-State-Zip: ORLANDO FL 32803

Title PRESIDENT
Name ADLER, MARC
Address 101 NORTH MONROE STREET
SUITE 1000
City-State-Zip: TALLAHASSEE FL 32301

Title DIRECTOR
Name AMAT, SUSAN
Address 800 NORTH MAGNOLIA
1100
City-State-Zip: ORLANDO FL 32803

Title DIRECTOR
Name JOHNSON, GARRETT
Address 800 N. MAGNOLIA
SUITE 1100
City-State-Zip: ORLANDO FL 32803

Title SECRETARY
Name DUSTI, LORNA
Address 800 NORTH MAGNOLIA AVENUE
SUITE 1100
City-State-Zip: ORLANDO FL 32803

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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: MEREDITH PELTON**EXECUTIVE DIRECTOR**

04/07/2022

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title EXECUTIVE DIRECTOR
Name PELTON, MEREDITH
Address 101 NORTH MONROE STREET
SUITE 1000
City-State-Zip: TALLAHASSEE FL 32301

Title TREASURER
Name DOVALE, DAISY
Address 800 NORTH MAGNOLIA AVENUE
SUITE 1100
City-State-Zip: ORLANDO FL 32803