

**2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P15000016043

**Entity Name:** PMI SOUTH INC.**Current Principal Place of Business:**8416 LAUREL FAIR CIRCLE  
SUITE 100  
TAMPA, FL 33610**Current Mailing Address:**8416 LAUREL FAIR CIRCLE  
SUITE 100  
TAMPA, FL 33610 US**FEI Number:** 47-3209585**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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:** NATALIE PICKENS

08/07/2024

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title	CEO
Name	HICKS, LARRY
Address	8416 LAUREL FAIR CIRCLE SUITE 100
City-State-Zip:	TAMPA FL 33610

Title	CFO
Name	MCEWAN , PAUL
Address	8416 LAUREL FAIR CIRCLE SUITE 100
City-State-Zip:	TAMPA FL 33610

Title	DIRECTOR
Name	BERG, JOSH
Address	8416 LAUREL FAIR CIRCLE SUITE 100
City-State-Zip:	TAMPA FL 33610

Title	DIRECTOR
Name	HAUSSMAN, BILL
Address	8416 LAUREL FAIR CIRCLE SUITE 100
City-State-Zip:	TAMPA FL 33610

Title	DIRECTOR
Name	SHABECOFF, PETER
Address	8416 LAUREL FAIR CIRCLE SUITE 100
City-State-Zip:	TAMPA FL 33610

Title	DIRECTOR
Name	WILKINS, ANDY
Address	8416 LAUREL FAIR CIRCLE SUITE 100
City-State-Zip:	TAMPA FL 33610

*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:** PAUL MCEWAN

CFO

08/07/2024

Electronic Signature of Signing Officer/Director Detail

Date