

2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P16000041900

Entity Name: LAKIN ROBINSON DURHAM KANE KURPIERS, P.A.

Current Principal Place of Business:

WELLS FARGO CENTER
100 S ASHLEY DR STE 800
TAMPA, FL 33602

Current Mailing Address:

WELLS FARGO CENTER
100 S ASHLEY DR STE 800
TAMPA, FL 33602 US

FEI Number: 81-2705034

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LAKIN, JOHN F
1409 86TH COURT NW
BRADENTON, FL 34209 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
Name LAKIN, JOHN F
Address WELLS FARGO CENTER
100 S ASHLEY DR STE 800
City-State-Zip: TAMPA FL 33602

Title VP
Name ROBINSON, LAYON II
Address WELLS FARGO CENTER
100 S ASHLEY DR STE 800
City-State-Zip: TAMPA FL 33602

Title T
Name KANE, PATRICK J
Address WELLS FARGO CENTER
100 S ASHLEY DR STE 800
City-State-Zip: TAMPA FL 33602

Title S
Name KURPIERS, RONALD J II
Address WELLS FARGO CENTER
100 S ASHLEY DR STE 800
City-State-Zip: TAMPA FL 33602

Title S
Name DURHAM, BRYCE V
Address WELLS FARGO CENTER
100 S ASHLEY DR STE 800
City-State-Zip: TAMPA FL 33602

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: PATRICK KANE

TREASURER

05/03/2017

Electronic Signature of Signing Officer/Director Detail

Date