

2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000087347

Entity Name: MAGUIRE & ASSOCIATES, INC.

Current Principal Place of Business:

1 DOLPHIN DR
SAINT AUGUSTINE, FL 32080

Current Mailing Address:

P.O. BOX 2202
SAINT AUGUSTINE, FL 32085

FEI Number: 59-3286686

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MAGUIRE, BRUCE
1 DOLPHIN DRIVE
ST. AUGUSTINE, FL 32080 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 PSTD
Name MAGUIRE, BRUCE
Address 297 ST. GEORGE STREET
City-State-Zip: ST. AUGUSTINE FL 32084

Title VP/D
Name WHETSTONE, VIRGINIA
Address 297 ST. GEORGE STREET
City-State-Zip: SAINT AUGUSTINE FL 32084

Title D
Name MAGUIRE, CHRISTOPHER
Address 11 SURFSIDE AVE
City-State-Zip: ST. AUGUSTINE FL 32084

Title D
Name MAGUIRE, SARAH
Address 11 SURFSIDE AVE
City-State-Zip: ST. AUGUSTINE FL 32084

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: BRUCE A. MAGUIRE

PRESIDENT

04/19/2017

Electronic Signature of Signing Officer/Director Detail

Date