2021 FLORIDA PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 14, 2021
Secretary of State
1921777096CC

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Entity Name: GLENN RASMUSSEN, P.A.

Current Principal Place of Business:

610 S. ROME AVENUE
#502
TAMPA, FL 33606

Current Mailing Address:

610 S. ROME AVENUE
#502
TAMPA, FL 33606 US

FEI Number: 59-3349668

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

RASMUSSEN, ROBERT C
610 S. ROME AVENUE
#502
TAMPA, FL 33606 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: ROBERT C. RASMUSSEN 02/14/2021

Electronic Signature of Registered Agent — Date

Officer/Director Detail :

Title	DVAS	Title	PD
Name	RASMUSSEN, ROBERT C	Name	GLENN, ROBERT B
Address	610 S. ROME AVENUE #502	Address	100 NORTH TAMPA STREET SUITE 2200
City-State-Zip:	TAMPA FL 33606	City-State-Zip:	TAMPA FL 33602
Title	DVAS	Title	DVAS
Name	COLGAN, MICHAEL B	Name	ANDREU, TIMOTHY A
Address	100 NORTH TAMPA STREET SUITE 2200	Address	100 NORTH TAMPA STREET SUITE 2200
City-State-Zip:	TAMPA FL 33602	City-State-Zip:	TAMPA FL 33602
Title	DVAS	Title	DVAS
Name	HANLEY, MARK A	Name	WARD, ALYSA J
Address	100 NORTH TAMPA STREET SUITE 2200	Address	100 NORTH TAMPA STREET SUITE 2200
City-State-Zip:	TAMPA FL 33602	City-State-Zip:	TAMPA FL 33602
Title	DVAS		
Name	RICE, EDWIN G		
Address	100 NORTH TAMPA STREET SUITE 2200		
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: ROBERT C. RASMUSSEN VICE PRESIDENT 02/14/2021

Electronic Signature of Signing Officer/Director Detail — Date