

**2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P96000089316

**Entity Name:** ESTES, INGRAM, FOELS & GIBBS, P.A.

**Current Principal Place of Business:**

37 NORTH ORANGE AVE  
STE 300  
ORLANDO, FL 32801-2439

**Current Mailing Address:**

37 NORTH ORANGE AVE  
STE 300  
ORLANDO, FL 32801-2439

**FEI Number:** 59-3407579

**Certificate of Status Desired:** Yes

**Name and Address of Current Registered Agent:**

INGRAM, J. CHARLES  
37 N ORANGE AVE  
STE 300  
ORLANDO, FL 32801 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           STD  
Name           INGRAM, J. CHARLES  
Address        37 N ORANGE AVE., STE 300  
City-State-Zip: ORLANDO FL 32801-2439

Title           PD  
Name           ESTES, MICHAEL A  
Address        37 N ORANGE AVE., STE 300  
City-State-Zip: ORLANDO FL 32801-2439

Title           VD  
Name           FOELS, CRAIG S  
Address        37 NORTH ORANGE AVE, SUITE 300  
City-State-Zip: ORLANDO FL 32801-2439

Title           VD  
Name           GIBBS, ERIC P  
Address        37 NORTH ORANGE AVE, SUITE 300  
City-State-Zip: ORLANDO FL 32801-2439

*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:** MICHAEL A. ESTES

**PRESIDENT**

**02/20/2015**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date