

**2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P96000097861

**Entity Name:** B. PAUL KATZ, P.A.

**Current Principal Place of Business:**

1 FLORIDA PARK DR SOUTH  
ATRIUM SUITE  
PALM COAST, FL 32137

**Current Mailing Address:**

1 FLORIDA PARK DR SOUTH  
ATRIUM SUITE  
PALM COAST, FL 32137 US

**FEI Number:** 59-3420685

**Certificate of Status Desired:** No

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

KATZ, B. PAUL  
1 FLORIDA PARK DR, SOUTH  
ATRIUM SUITE  
PALM COAST, FL 32137 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 PD  
Name KATZ, B. PAUL  
Address 1 FLORIDA PARK DR. S, ATRIUM STE.  
City-State-Zip: PALM COAST FL 32137

*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:** B. PAUL KATZ

PD

04/27/2018

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

\_\_\_\_\_ Date