

**2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P97000061791

**Entity Name:** MEIER, BONNER, MUSZYNSKI, O'DELL & HARVEY, P.A.

**Current Principal Place of Business:**

260 WEKIVA SPRINGS ROAD  
SUITE 2000  
LONGWOOD, FL 32779

**Current Mailing Address:**

260 WEKIVA SPRINGS ROAD  
SUITE 2000  
LONGWOOD, FL 32779

**FEI Number:** 59-3457102

**Certificate of Status Desired:** No

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

BONNER, ROBERT E  
260 WEKIVA SPRINGS ROAD  
SUITE 2000  
LONGWOOD, FL 32779 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 MEIER, GEORGE AIII  
Address 260 WEKIVA SPRINGS ROAD, SUITE  
2000  
City-State-Zip: LONGWOOD FL 32779

Title SD  
Name HARVEY, VERONICA L  
Address 260 WEKIVA SPRINGS ROAD, SUITE  
2000  
City-State-Zip: LONGWOOD FL 32779

Title VD  
Name BONNER, ROBERT E  
Address 260 WEKIVA SPRINGS ROAD, SUITE  
2000  
City-State-Zip: LONGWOOD FL 32779

Title TD  
Name MUSZYNSKI, ALEXANDER III  
Address 260 WEKIVA SPRINGS ROAD, SUITE  
2000  
City-State-Zip: LONGWOOD FL 32779

Title D  
Name O'DELL, DONALD L  
Address 260 WEKIVA SPRINGS ROAD, SUITE  
2000  
City-State-Zip: LONGWOOD FL 32779

*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:** VERONICA L. HARVEY

**SECRETARY/DIRECTOR**

**02/11/2013**

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

\_\_\_\_\_  
Date