

**2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P98000057984

**Entity Name:** RINGER, HENRY, BUCKLEY & SEACORD, P.A.

**FILED**  
**Feb 27, 2014**  
**Secretary of State**  
**CC4855490412**

**Current Principal Place of Business:**

14 E. WASHINGTON STREET  
STE 200  
ORLANDO, FL 32801

**Current Mailing Address:**

P.O. BOX 4922  
ORLANDO, FL 32802

**FEI Number: 59-3521285**

**Certificate of Status Desired: No**

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

HENRY, ROBERT D  
14 E. WASHINGTON STREET  
STE 200  
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 D  
Name RINGER, GEOFFREY D  
Address 14 E. WASHINGTON STREET #200  
City-State-Zip: ORLANDO FL 32801

Title D  
Name HENRY, ROBERT D  
Address 14 E. WASHINGTON ST. #200  
City-State-Zip: ORLANDO FL 32801

Title D  
Name BUCKLEY, MARTIN T  
Address 14 E. WASHINGTON ST. #200  
City-State-Zip: ORLANDO FL 32801

Title D  
Name SEACORD, PIERRE J  
Address 14 E WASHINGTON STREET #200  
City-State-Zip: ORLANDO FL 32801

Title D  
Name JUSTICE, JOSEPH S  
Address 14 E WASHINGTON STREET #200  
City-State-Zip: ORLANDO FL 32801

*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 D HENRY**

**SHAREHOLDER**

**02/27/2014**

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

\_\_\_\_\_  
Date