

2021 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S98715

Entity Name: VECCHIO, CARRIER, FELDMAN & JOHANNESSEN, P.A.**Current Principal Place of Business:**3308 CLEVELAND HGTS. BLVD
LAKELAND, FL 33803**Current Mailing Address:**3308 CLEVELAND HGTS. BLVD
LAKELAND, FL 33803 US**FEI Number:** 59-3094798**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**VECCHIO, THOMAS P
3308 CLEVELAND HGTS. BLVD
LAKELAND, FL 33803 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	VP
Name	CARRIER, BETTINA N
Address	590 GRASSLANDS VILLAGE CIR
City-State-Zip:	LAKELAND FL 33803

Title	P
Name	VECCHIO, THOMAS P
Address	959 ASHTON OAKS CIRCLE
City-State-Zip:	LAKELAND FL 33813

Title	S
Name	JOHANNESSEN, KRISTEN L
Address	4722 RUE BORDEAUX
City-State-Zip:	LUTZ FL 33558

Title	TR
Name	FELDMAN, BARBI L
Address	412 GOLDEN ELM DRIVE
City-State-Zip:	SEFFNER FL 33584

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: THOMAS P VECCHIO**PRESIDENT****01/29/2021**_____
Electronic Signature of Signing Officer/Director Detail_____
Date