

2024 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000004036

Entity Name: DALE PARTNERS ARCHITECTS P.A.**Current Principal Place of Business:**ONE JACKSON PLACE, SUITE 250
188 E. CAPITOL STREET
JACKSON, MS 39201**Current Mailing Address:**ONE JACKSON PLACE, SUITE 250
188 E. CAPITOL STREET
JACKSON, MS 39201 US**FEI Number:** 64-0854019**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**REGISTERED AGENT SOLUTIONS, INC.
2894 REMINGTON GREEN LANE
SUITE A
TALLAHASSEE, FL 32308 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	PRESIDENT
Name	JAUNSEN, LEIGH G
Address	188 EAST CAPITOL STREET STE 250
City-State-Zip:	JACKSON MS 39201

Title	VP
Name	BARNES, JEFFREY R
Address	188 EAST CAPITOL STREET STE 250
City-State-Zip:	JACKSON MS 39201

Title	PARTNER
Name	BLOUNT, RUSSELL
Address	ONE JACKSON PLACE, SUITE 250 188 E. CAPITOL STREET
City-State-Zip:	JACKSON MS 39201

Title	SECRETARY
Name	AGOSTINELLI, JASON
Address	ONE JACKSON PLACE, SUITE 250 188 E. CAPITOL STREET
City-State-Zip:	JACKSON MS 39201

Title	PARTNER
Name	POLEN, NEIL
Address	ONE JACKSON PLACE, SUITE 250 188 E. CAPITOL STREET
City-State-Zip:	JACKSON MS 39201

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: JAUNSEN, LEIGH G**PRESIDENT****01/13/2024**_____
Electronic Signature of Signing Officer/Director Detail_____
Date