## 2016 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F11000001074

Entity Name: KARPUS MANAGEMENT, INC.

**Current Principal Place of Business:** 

183 SULLY'S TRAIL PITTSFORD, NY 14534

**Current Mailing Address:** 

183 SULLY'S TRAIL PITTSFORD, NY 14534

FEI Number: 16-1290558 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

KARPUS, GEORGE W NEWGATE EXECUTIVE SUITES 5100 TAMIAMI TRAIL NORTH SUITE 127 NAPLES, FL 34103 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:

Address

Name

Electronic Signature of Registered Agent

Date

**FILED** Jan 25, 2016

**Secretary of State** 

CC9539512823

Officer/Director Detail:

Title CHAIRMAN OF THE BOARD Title EXECUTIVE VICE PRESIDENT

KARPUS, GEORGE W Name Name CONSLER, DANA Address 4244 BRYNWOOD DRIVE Address 183 SULLY'S TRAIL City-State-Zip: PITTSFORD NY 14534 City-State-Zip: NAPLES FL 34119

Title SENIOR DIRECTOR OF Title CHIEF FINANCIAL OFFICER / CHIEF

> **INVESTMENTS COMPLIANCE OFFICER**

Name LOMANDO, SHARON Name CRANE, KATHLEEN F Address 183 SULLY'S TRAIL 183 SULLY'S TRAIL

City-State-Zip: PITTSFORD NY 14534 City-State-Zip: PITTSFORD NY 14534

DIRECTOR OF INVESTMENT Title Title VΡ

PERSONNEL / SENIOR TAX-DUFFY, THOMAS SENSITIVE MANAGER

Address 183 SULLY'S TRAIL Name LIPPINCOTT, DANIEL

City-State-Zip: PITTSFORD NY 14534 Address 183 SULLY'S TRAIL City-State-Zip: PITTSFORD NY 14534

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: KATHLEEN F CRANE

CHIEF FINANCIAL **OFFICER** 

01/25/2016