

**2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# G79652

**Entity Name:** E.C. DRIVER & ASSOCIATES, INC.

**Current Principal Place of Business:**

7800 CONGRESS AVE  
SUITE 200  
BOCA RATON, FL 33487

**FILED**  
**Jan 02, 2013**  
**Secretary of State**  
**CC6113266657**

**Current Mailing Address:**

600 MONTGOMERY STREET  
25TH FLOOR  
SAN FRANCISCO, CA 94111 US

**FEI Number:** 59-2375705

**Certificate of Status Desired:** No

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

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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 SINGH, SARABJIT  
Address 2020 K STREET NW, SUITE 300  
City-State-Zip: WASHINGTON DC 20006

Title P  
Name ECHAGARRUA, MARIO  
Address 150 E PALMETTO PARK RD.  
City-State-Zip: BOCA RATON FL 33432

Title D  
Name JANDEGIAN, GARY  
Address 600 MONTGOMERY ST., 25TH FLR.  
City-State-Zip: SAN FRANCISCO CA 94111

Title S  
Name JONES, KRISTIN L  
Address 600 MONTGOMERY ST. 25TH FL  
City-State-Zip: SAN FRANCISCO CA 94111

Title V  
Name PHILLIPS, JAMES  
Address 500 N. WESTSHORE BLVD., STE 500  
City-State-Zip: TAMPA FL 33609

Title DV  
Name HICKS, H T  
Address 600 MONTGOMERY ST., 25TH FL  
City-State-Zip: SAN FRANCISCO CA 94111

*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:** KRISTIN L. JONES

**SECRETARY**

**01/02/2013**

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

\_\_\_\_\_  
Date