2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 706019

Entity Name: ALCOHOLIC SERVICE CENTER INC

Current Principal Place of Business:

20 WEST 4TH STREET JACKSONVILLE. FL 32206

Current Mailing Address:

20 WEST 4TH STREET JACKSONVILLE. FL 32206 US

FEI Number: 59-2919095 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

SKALSKI, JANE 20 W 4TH STREET JACKSONVILLE, FL 32206 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: JANE SKALSKI 02/25/2024

Electronic Signature of Registered Agent Date

Officer/Director Detail:

Title PRESIDENT Title TREASURER

NameMATTSON, GEORGENameSKALSKI MATTSON, JANEAddress20 WEST 4TH STREETAddress20 WEST 4TH STREETCity-State-Zip:JACKSONVILLE FL 32206City-State-Zip:JACKSONVILLE FL 32206

Title **BOARD MEMBER** Title **BOARD MEMBER** Name TRIGLIA, ROBERT CAMPBELL, ROBERT Name Address 20 WEST 4TH STREET Address 20 WEST 4TH STREET JACKSONVILLE FL 32206 City-State-Zip: City-State-Zip: JACKSONVILLE FL 32206

TitleBOARD MEMBERTitleBOARD MEMBERNameOBARSKI, PATRICIANameLYNCH, TODD

Address 20 WEST 4TH STREET Address 20 WEST 4TH STREET

City-State-Zip: JACKSONVILLE FL 32206

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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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: JANE SKALSKI MATTSON

REGISTERED AGENT

02/25/2024

FILED Feb 25, 2024

Secretary of State

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