1 WAY FL 32643 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.			
NICOLLE MICHAELS			04/04/2022
Electronic Signature of Registered Agent			Date
tor Detail :			
PRESIDENT	Title	VP, TREASURER	
MICHAELS, NICOLLE	Name	SASSER, KRISTY	
16048 NW 208TH WAY	Address	16048 NW 208TH WAY	
HIGH SPRINGS FL 32643	City-State-Zip:	HIGH SPRINGS FL 32643	
SECRETARY			
HOWELL, LINDSAY			
16048 NW 208TH WAY			
HIGH SPRINGS FL 32643			
	FL 32643 US ntity submits this statement for the purpose of changing its regists NICOLLE MICHAELS Electronic Signature of Registered Agent or Detail : PRESIDENT MICHAELS, NICOLLE H6048 NW 208TH WAY HIGH SPRINGS FL 32643 SECRETARY HOWELL, LINDSAY H6048 NW 208TH WAY	FL 32643 US         ntity submits this statement for the purpose of changing its registered office or registered statement for the purpose of changing its registered office or registered statement.         NICOLLE MICHAELS         Electronic Signature of Registered Agent         or Detail :         PRESIDENT         VICHAELS, NICOLLE         Name         16048 NW 208TH WAY         HIGH SPRINGS FL 32643         City-State-Zip:         SECRETARY         HOWELL, LINDSAY         16048 NW 208TH WAY	FL 32643 US         ntity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Fl         NICOLLE MICHAELS         Electronic Signature of Registered Agent         or Detail :         PRESIDENT       Title         VICHAELS, NICOLLE         Name       SASSER, KRISTY         16048 NW 208TH WAY       Address         16048 NW 208TH WAY         HIGH SPRINGS FL 32643         SECRETARY         HOWELL, LINDSAY         16048 NW 208TH WAY

16048 NW 208TH WAY HIGH SPRINGS. FL 32643 US

## FEI Number: 81-0971647

## Name and Address of Current Registered Agent:

MICHAELS, NICOLLE 16048 HIGH

#### 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: NICOLLE MICHAELS ROBERTS

PRESIDENT

### 04/04/2022

Electronic Signature of Signing Officer/Director Detail

FILED Apr 04, 2022 Secretary of State 3584281766CC

Certificate of Status Desired: No

Date

# 2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

# DOCUMENT# N15000012065

# Entity Name: 10-42 CORPORATION

# **Current Principal Place of Business:**

16048 NW 208TH WAY HIGH SPRINGS. FL 32643

**Current Mailing Address:**