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.

PRESIDENT

SIGNATURE: RL ANDREWS

Electronic Signature of Signing Officer/Director Detail

Officer/Director Detail : Title Р Title VP ANDREWS, R. L. Name ANDREWS, R. JEFF Name 2290 SE LAUREL RUN DRIVE Address 1962 SE TWIN BRIDGE CIRCLE Address City-State-Zip: OCALA FL 34471 City-State-Zip: OCALA FL Title TREASURER

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.

2290 SE LAUREL RUN DRIVE OCALA, FL 34471 US

2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 284091

Entity Name: ANDREWS ENTERPRISES INC

Current Principal Place of Business:

2290 SE LAUREL RUN DRIVE OCALA, FL 34471

Current Mailing Address:

2290 SE LAUREL RUN DRIVE OCALA. FL 34471 US

FEI Number: 59-1095097

Name and Address of Current Registered Agent:

ANDREWS, SANDY

OCALA FL 34471

2290 SE LAUREL RUN DRIVE

Electronic Signature of Registered Agent

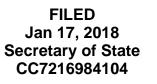
ANDREWS, RICHARD L.

SIGNATURE:

Name

Address

City-State-Zip:



Date

Certificate of Status Desired: No

01/17/2018

Date