

**2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 293297

**Entity Name:** JACK M. BERRY, INC.

**Current Principal Place of Business:**

5036 DR. PHILLIPS BLVD  
STE 377  
ORLANDO, FL 32819

**FILED**  
**Apr 24, 2018**  
**Secretary of State**  
**CC7627982982**

**Current Mailing Address:**

PO BOX 725  
ATTN: KATHY MCDANIEL  
WINDERMERE, FL 34786-0725 US

**FEI Number:** 59-1095295

**Certificate of Status Desired:** Yes

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

FLOYD, THOMAS C  
1556 6TH ST SE  
WINTER HAVEN, FL 33880 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 S  
Name MCDANIEL, KATHY H  
Address PO BOX 725  
City-State-Zip: WINDERMERE FL 34786

Title CD  
Name BERRY, JACK M. JR.  
Address P.O. BOX 725  
City-State-Zip: WINDERMERE FL 34786-0725

Title DP  
Name CLOUGHLEY, JAMES E  
Address PO BOX 459  
City-State-Zip: LABELLE FL 33975

Title VP  
Name FLOYD, THOMAS C  
Address 1556 6TH ST SE  
City-State-Zip: WINTER HAVEN FL 33880

Title DVP  
Name BERRY, JACK M. III  
Address PO BOX 725  
City-State-Zip: WINDERMERE FL 34786-0725

*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:** KATHY H MCDANIEL

S

04/24/2018

Electronic Signature of Signing Officer/Director Detail

Date