

2022 FLORIDA PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# 331832

Entity Name: FLORIDA MECHANICAL SYSTEMS, INC.**Current Principal Place of Business:**2734 EDISON AVENUE
JACKSONVILLE, FL 32254**Current Mailing Address:**2734 EDISON AVENUE
JACKSONVILLE, FL 32254 US**FEI Number:** 59-1212797**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**COLD, KATHLEEN H
10151 DEERWOOD PARK BLVD, BLDG 300,STE 300
LIPPES,MATHIAS,WEXLER,FRIEDMAN LLP
JACKSONVILLE, FL 32256 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 SECRETARY
Name KING, CAROL S
Address 2734 EDISON AVENUE
City-State-Zip: JACKSONVILLE FL 32254

Title DIRECTOR
Name GAY, ROBERT D
Address 2734 EDISON AVENUE
City-State-Zip: JACKSONVILLE FL 32254

Title PRESIDENT
Name JONES, PAUL
Address 2734 EDISON AVENUE
City-State-Zip: JACKSONVILLE FL 32254

Title TREASURER
Name DEPUY, MERCEDITES
Address 2734 EDISON AVENUE
City-State-Zip: JACKSONVILLE FL 32254

Title VP
Name RICE, CHAD
Address 2734 EDISON AVENUE
City-State-Zip: JACKSONVILLE FL 32254

Title DIRECTOR
Name CROFT, DEBORAH
Address 2734 EDISON AVENUE
City-State-Zip: JACKSONVILLE FL 32254

Title ASST. SECRETARY
Name PAGE, CHRISTINA
Address 2734 EDISON AVENUE
City-State-Zip: JACKSONVILLE FL 32254

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: MERCEDITES DEPUY**TREASURER****02/25/2022**

Electronic Signature of Signing Officer/Director Detail

Date