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. **VP OF OPERATIONS** 01/21/2021

SIGNATURE: LANCE STONER

Electronic Signature of Signing Officer/Director Detail

Title	VP			
Name	STONER, LANCE C			
Address	847 WATERMAN RD. S.			
City-State-Zip:	JACKSONVILLE FL 32207			

Address 13770 PLEASANT VALLEY DR

City-State-Zip: JACKSONVILLE FL

SIGNATI	JRE:					
Electronic Signature of Registered Agent						
Officer/D	Director Detail :					
Title	PD	Title	STD			
Name	STONER, LYNN W	Name	STONER, CONNIE CHANCEL			

Address

City-State-Zip:

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Current Principal Place of Business: 6115 ARLINGTON EXPRESSWAY JACKSONVILLE, FL 32211

Current Mailing Address:

6115 ARLINGTON EXPRESSWAY P.O.BOX 8622 (32239) JACKSONVILLE, FL 32211

FEI Number: 59-1654074

13770 PLEASANT VALLEY DR. JACKSONVILLE, FL 32225 US

STONER, LYNN W.

Name and Address of Current Registered Agent:

DOCUMENT# 501142

2021 FLORIDA PROFIT CORPORATION ANNUAL REPORT

Entity Name: DOUBLE S ENTERPRISES, INC.

Jan 21, 2021 Secretary of State 9227547046CC

FILED

Certificate of Status Desired: No

13770 PLEASANT VALLEY DR

JACKSONVILLE FL

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.

Date

Date