

**2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# H50087

**Entity Name:** A. C. SKINNER COMPANY**Current Principal Place of Business:**6803 OLD KINGS RD SOUTH  
JACKSONVILLE, FL 32217**Current Mailing Address:**6803 OLD KINGS RD SOUTH  
JACKSONVILLE, FL 32217 US**FEI Number:** 59-2507336**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**SKINNER, CHRISTOPHER F  
2963 DUPONT AVE STE 2  
JACKSONVILLE, FL 32217 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	D
Name	SKINNER, A. C. JR.
Address	6803 OLD KINGS RD SOUTH
City-State-Zip:	JACKSONVILLE FL 32217

Title	P
Name	SKINNER, A. C. JR.
Address	6803 OLD KINGS RD SOUTH
City-State-Zip:	JACKSONVILLE FL 32217

Title	V
Name	SKINNER, CHRISTOPHER F.
Address	6803 OLD KINGS RD SOUTH
City-State-Zip:	JACKSONVILLE FL 32217

Title	V
Name	SKINNER, DAVID G.
Address	6803 OLD KINGS RD SOUTH
City-State-Zip:	JACKSONVILLE FL 32217

*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:** DAVID G. SKINNER

VP

04/12/2019

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date