

**2021 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# J72874

**Entity Name:** 225 UNLIMITED, INC.

**Current Principal Place of Business:**

337 NORTHLAKE BLVD.  
SUITE 1000  
ALTAMONTE SPRINGS, FL 32701

**Current Mailing Address:**

337 NORTHLAKE BLVD.  
SUITE 1000  
ALTAMONTE SPRINGS, FL 32701 US

**FEI Number:** 59-2803954

**Certificate of Status Desired:** No

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

HIGGINS, KIM  
1340 NORTH ATLANTIC AVE  
NEW SMYRNA BEACH, FL 32169 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            PTD  
Name            HIGGINS, KIM  
Address        1340 NORTH ATLANTIC AVE  
City-State-Zip: NEW SMYRNA BEACH FL 32169

*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:** KIM HIGGINS

**PRESIDENT**

**04/08/2021**

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

\_\_\_\_\_  
Date