

**2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# K52484

**FILED  
Mar 19, 2016  
Secretary of State  
CC0394130939**

**Entity Name:** J.F. SINK & SONS, INC.

**Current Principal Place of Business:**

% D SINK  
450 92ND AVE. NORTH  
ST. PETERSBURG, FL 33702

**Current Mailing Address:**

% D SINK  
450 92ND AVE. NORTH  
ST. PETERSBURG, FL 33702

**FEI Number:** 59-2919341

**Certificate of Status Desired:** No

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

SINK, DONNA J.  
450 92ND AVE. NORTH  
ST. PETERBURG, FL 33702 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            SINK, DONNA J.  
Address        450 92ND AVE. NORTH  
City-State-Zip: ST. PETERSBURG FL

Title            VP  
Name            SINK, NIKOLAS F  
Address        4011 46TH AVE N  
City-State-Zip: ST PETERSBURG FL 33714

Title            P  
Name            SINK, KIRK  
Address        757 42ND AVE. N.E.  
City-State-Zip: ST. PETERSBURG FL 33703

*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:** NIKOLAS SINK

VP

03/19/2016

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

\_\_\_\_\_  
Date