

**2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# K86013

**Entity Name:** PRO-CO INCORPORATED

**Current Principal Place of Business:**

910 BELLE AVE  
1000  
WINTER SPRINGS, FL 32708

**Current Mailing Address:**

910 BELLE AVE  
1000  
WINTER SPRINGS, FL 32708 US

**FEI Number:** 59-2949494

**Certificate of Status Desired:** No

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

MULLEN, BRIAN J  
6713 TURTLEMOUND ROAD  
414  
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 PT  
Name MULLEN, BRIAN J  
Address 6713 TURTLEMOUND ROAD  
414  
City-State-Zip: NEW SYMRNA BEACH FL 32169

Title S  
Name MULLEN, MARGARET B  
Address 6713 TURTLEMOUND ROAD  
414  
City-State-Zip: NEW SMYRNA BEACH FL 32169

Title V  
Name GRABE, WILLIAM  
Address 910 BELLE AVE  
City-State-Zip: WINTER SPRINGS FL 32708

*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:** BRIAN MULLEN

PT

01/23/2023

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

\_\_\_\_\_  
Date