

**2021 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# L78143

**Entity Name:** FLORIDA EXCELL, INC.

**Current Principal Place of Business:**

133 MERIDIAN HILLS RD  
TALLAHASSEE, FL 32312

**Current Mailing Address:**

P O BOX 797  
HAVANA, FL 32333

**FEI Number:** 65-0202744

**Certificate of Status Desired:** No

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

CHARLES C. FIRE  
133 MERIDIAN HILLS RD.  
TALLAHASSEE, FL 32312 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 PD  
Name HELMA M. FIRE, PHD.  
Address P.O. BOX 797  
City-State-Zip: HAVANA FL 32333

Title VTD  
Name CHARLES C. FIRE  
Address P.O. BOX 797  
City-State-Zip: HAVANA FL 32333

Title S  
Name KATHY FIRE  
Address P.O. BOX 797  
City-State-Zip: HAVANA FL 32333

Title AT  
Name KENNETH C. FIRE  
Address P.O. BOX 797  
City-State-Zip: HAVANA FL 32333

*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:** CHARLES C. FIRE

VP / TREASURER

02/23/2021

Electronic Signature of Signing Officer/Director Detail

Date