

**2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P01000102749

**Entity Name:** ACOSTA SERVICES, INC.**Current Principal Place of Business:**6600 CORPORATE CENTER PKWY  
JACKSONVILLE, FL 32216**Current Mailing Address:**6600 CORPORATE CENTER PKWY  
JACKSONVILLE, FL 32216**FEI Number:** 59-3752127**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATE CREATIONS NETWORK INC.  
801 US HIGHWAY 1  
NORTH PALM BEACH, FL 33408 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	SECRETARY
Name	JOHNSON, TODD C
Address	6600 CORPORATE CENTER PKWY
City-State-Zip:	JACKSONVILLE FL 32216

Title	SVP
Name	ATKINSON, MARTIN
Address	6600 CORPORATE CENTER PKWY
City-State-Zip:	JACKSONVILLE FL 32216

Title	PRESIDENT & CHIEF EXECUTIVE OFFICER
Name	WYNNE, BRIAN
Address	6600 CORPORATE CENTER PARKWAY
City-State-Zip:	JACKSONVILLE FL 32216

Title	CHIEF ACCOUNTING OFFICER
Name	TAYLOR, TODD
Address	6600 CORPORATE CENTER PKWY
City-State-Zip:	JACKSONVILLE FL 32216

*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:** MARTIN ATKINSON**SVP & CONTROLLER****04/14/2023**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date