# 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: LOUISE JORN

MGR

#### 02/09/2023

Date

# 2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000135575

Entity Name: JORN SALES & MARKETING, INC.

#### **Current Principal Place of Business:**

3121 FAIRLANE FARMS ROAD 4 WELLINGTON, FL 33414

# **Current Mailing Address:**

14745 HORSESHOE TRACE WELLINGTON, FL 33414

# FEI Number: 16-1644625

### Name and Address of Current Registered Agent:

JORN, FREDERICK AIII 14745 HORSESHOE TRACE WELLINGTON, FL 33414 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

### **Officer/Director Detail :**

Title	D	Title	D
Name	JORN, FREDERICK AIII	Name	JORN, LOUISE A
Address	14745 HORSESHOE TRACE	Address	14745 HORSESHOE TRACE
City-State-Zip:	WELLINGTON FL 33414	City-State-Zip:	WELLINGTON FL 33414

Electronic Signature of Signing Officer/Director Detail

Date

# FILED Feb 09, 2023 Secretary of State 0397048257CC

Certificate of Status Desired: No