| 6680 N LECAN BEVERLY HILL | - | | | |
|--|--|-----------------|---------------------------|------------|
| | | | | |
| Current Mailing Address: | | | | |
| 6680 N LEC BEVERLY H | ANTO HWY IILLS, FL 34465 US | | | |
| FEI Number: 20-0960435 C | | | Certificate of Status Des | ired: No |
| Name and Address of Current Registered Agent: | | | | |
| MERRIMAN, TAMARA L 5151 E. STOKES FERRY RD HERNANDO, FL 34442 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: TAMARA L MERRIMAN | | | | 02/06/2024 |
| | Electronic Signature of Registered Agent | | | Date |
| Officer/Director Detail : | | | | |
| Title | Ρ | Title | S, T | |
| Name | MESSER, ED E | Name | MERRIMAN, TAMARA | |
| Address | 5139 E. STOKES FERRY ROAD | Address | 5151 E. STOKES FERRY RD | |
| City-State-Zip: | HERNANDO FL 34442 | City-State-Zip: | HERNANDO FL 34442 | |

2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT

Entity Name: ED MESSER - RELIANCE ENTERPRISES, INC.

DOCUMENT# P04000058358

Current Principal Place of Business:

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: TAMARA MERRIMAN

Electronic Signature of Signing Officer/Director Detail

S, T

FILED Feb 06, 2024 Secretary of State 4380577811CC