2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P0600002301

Entity Name: A 2 Z OF LAKE CITY, INC.

Current Principal Place of Business:

628 SE ALLISON COURT LAKE CITY, FL 32025

Current Mailing Address:

628 SE ALLISON COURT LAKE CITY. FL 32025

FEI Number: 54-2192133

Name and Address of Current Registered Agent:

SHEPARD, CAROL ED 628 S.E. ALLISON COURT LAKE CITY, FL 32025 US Certificate of Status Desired: Yes

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 | E: CAROL SHEPARD | | | 01/25/2018 |
|---------------------------|--|-----------------|----------------------|------------|
| | Electronic Signature of Registered Agent | | | Date |
| Officer/Director Detail : | | | | |
| Title | ED | Title | BM | |
| Name | SHEPARD, CAROL | Name | LAWTON, VANESSA | |
| Address | 628 SE ALLISON COURT | Address | 628 SE ALLISON COURT | |
| City-State-Zip: | LAKE CITY FL 32025 | City-State-Zip: | LAKE CITY FL 32025 | |
| | | | | |
| Title | BM | Title | FISCAL OFFICER | |
| Name | WILLEMS, NANCY | Name | WHITE, LEONA R | |
| Address | 628 SE ALLISON COURT | Address | 628 SE ALLISON COURT | |
| City-State-Zip: | LAKE CITY FL 32025 | City-State-Zip: | LAKE CITY FL 32025 | |

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: LEONA WHITE

FISCAL OFFICER

01/25/2018

Electronic Signature of Signing Officer/Director Detail

Date

FILED Jan 25, 2018 Secretary of State CC4270032132