

**2022 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P09000044494

**Entity Name:** SHARON GORIE, INC.

**Current Principal Place of Business:**

4775 SE DIXIE HWY.  
PORT SALERNO, FL 34997

**Current Mailing Address:**

4775 SE DIXIE HWY.  
PORT SALERNO, FL 34997

**FEI Number:** 27-0201681

**Certificate of Status Desired:** No

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

GORIE, MICHAEL  
4775 SE DIXIE HWY.  
PORT SALERNO, FL 34997 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 GORIE, SHARON  
Address 4775 SE DIXIE HWY  
City-State-Zip: PORT SALERNO FL 34997

Title VPD  
Name GORIE, MICHAEL  
Address 4775 SE DIXIE HWY  
City-State-Zip: PORT SALERNO FL 34997

*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:** MICHAEL GORIE

VPD

03/21/2022

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date