

2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P12000058201

Entity Name: JLYNN'S TRANSPORTATION, INC**Current Principal Place of Business:**14440 SW 41ST TERRACE
OCALA, FL 34473**Current Mailing Address:**14440 SW 41ST TERRACE
OCALA, FL 34473**FEI Number:** 45-5624975**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**JACOBS, WINSOME
352 MARION OAKS DRIVE
OCALA, FL 34473 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:** WINSOME JACOBS

05/01/2018

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	P/D
Name	THOMAS, ODEE
Address	14440 SW 41ST TERRACE
City-State-Zip:	OCALA FL 34473

Title	VP
Name	THOMAS, MICHELLE
Address	14440 SW 41ST TERRACE
City-State-Zip:	OCALA FL 34473

Title	T
Name	JACOBS, WINSOME
Address	352 MARION OAKS DR
City-State-Zip:	OCALA FL 34473

Title	D
Name	THOMAS, FANCETTA
Address	9806 FOSTER AVE
City-State-Zip:	BROOKLYN NY 11236

Title	D
Name	FREENEY, MICHAEL
Address	14457 SW 41ST TERRACE
City-State-Zip:	OCALA FL 34473

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: MICHELLE THOMAS

V.P.

05/01/2018

Electronic Signature of Signing Officer/Director Detail

Date