

2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P13000043288

Entity Name: HOME ELEVATOR FLORIDA, INC.

Current Principal Place of Business:

4842 HICKORY SHORES BLVD.
GULF BREEZE, FL 32563

Current Mailing Address:

4842 HICKORY SHORES BLVD.
GULF BREEZE, FL 32563 US

FEI Number: 46-2802470

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BONE, DAVID
4842 HICKORY SHORES BLVD.
GULF BREEZE, FL 32563 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 P
Name BONE, DAVID
Address 4842 HICKORY SHORES BLVD.
City-State-Zip: GULF BREEZE FL 32563

Title O
Name BONE, RENAY
Address 4842 HICKORY SHORES BLVD.
City-State-Zip: GULF BREEZE FL 32563

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: RENAY BONE

OFFICER

03/21/2020

Electronic Signature of Signing Officer/Director Detail

Date