above, or on an attachment with all other like empowered.

SIGNATURE: JAMES ROBINCHECK

DOCUMENT# P13000074907

2021 FLORIDA PROFIT CORPORATION ANNUAL REPORT

Entity Name: JAMES J ROBINCHECK, PA

Current Principal Place of Business:

439 NW SHEFFIELD CIR PORT ST. LUCIE. FL 34983

Current Mailing Address:

439 NW SHEFFIELD CIR PORT ST. LUCIE. FL 34983

FEI Number: 46-3854084

Name and Address of Current Registered Agent:

ROBINCHECK, MARGARET S 439 NW SHEFFIELD CIRCLE PT ST LUCIE, FL 34983 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

Officer/Director Detail :

Title	D	Title	D
Name	ROBINCHECK, JAMES J	Name	ROBINCHECK, MARGARET S
Address	439 NW SHEFFIELD CIR	Address	439 NW SHEFFIELD CIR
City-State-Zip:	PORT ST. LUCIE FL 34983	City-State-Zip:	PORT ST. LUCIE FL 34983

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

OWNER

Certificate of Status Desired: No

Date

01/24/2021

FILED Jan 24, 2021 Secretary of State 2154689403CC

Electronic Signature of Signing Officer/Director Detail

Date