## 2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P14000082001

Entity Name: LINCHPIN SOLUTIONS INC.

**Current Principal Place of Business:** 

4331 EPIC COVE

LAND O LAKES. FL 34638

**Current Mailing Address:** 

4331 EPIC COVE LAND O LAKES TAMPA, FL 34638 US

FEI Number: 47-2057601 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

PENA, EDWIN D 4331 EPIC COVE LAND O LAKES, FL 34638 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

FILED Feb 02, 2024

**Secretary of State** 

3865903427CC

Officer/Director Detail:

 Title
 CEO
 Title
 PRESIDENT

 Name
 PENA, EDWIN D
 Name
 FRESE, PAUL

Address 4331 EPIC COVE Address 2931 WINDROSE DRIVE
City-State-Zip: LAND O LAKES FL 34638 City-State-Zip: MARIETTA GA 30062

Title CONTROLLER

Name LEIZEAR, WILLIAM R

Address 6175 GUARDIAN GATEWAY

SUITE L

City-State-Zip: ABERDEEN MD 21005

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: WILLIAM R LEIZEAR, JR.

CONTROLLER

02/02/2024

Electronic Signature of Signing Officer/Director Detail

Date