

2021 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P17000079045

Entity Name: CHESTER DEAN, CORP.**Current Principal Place of Business:**3437 BLUE JAY DRIVE
TALLAHASSEE, FL 32305**Current Mailing Address:**3437 BLUE JAY DRIVE
TALLAHASSEE, FL 32305 US**FEI Number:** 85-1690206**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**PERKINS, JACQUELINE Y
3437 BLUE JAY DRIVE
TALLAHASSEE, FL 32305 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	D
Name	MATHIS, ROY L II
Address	9977 SW 38TH AVENUE
City-State-Zip:	OCALA FL 34476

Title	D
Name	PERKINS, JACQUELINE Y
Address	3437 BLUE JAY DRIVE
City-State-Zip:	TALLAHASSEE FL 32305

Title	D
Name	PERKINS, REGINUER D
Address	1618 KEITH STREET
City-State-Zip:	TALLAHASSEE FL 32310

Title	D
Name	PERKINS, JAMIL
Address	925 E. MAGNOLIA DRIVE APT. K3
City-State-Zip:	TALLAHASSEE FL 32301

Title	D
Name	PERKINS, ILA Q
Address	2037 DONALD DRIVE
City-State-Zip:	MORAGA CA 94556

Title	D
Name	PERKINS, ROMERIO D
Address	1501 SUNSET LANE
City-State-Zip:	TALLAHASSEE FL 32303

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: JACQUELINE Y. PERKINS**REGISTERED AGENT /
DIRECTOR****05/01/2021**_____
Electronic Signature of Signing Officer/Director Detail_____
Date