

**2021 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P19000069286

**Entity Name:** APPLESEED CAPITAL, INC.**Current Principal Place of Business:**6555 SANGER ROAD, STE 200  
ORLANDO, FL 32827**Current Mailing Address:**6555 SANGER ROAD, STE 200  
ORLANDO, FL 32827 US**FEI Number: 85-1093078****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**RIPIN, AARON J  
7189 LAKE ISLAND DRIVE  
LAKE WORTH, FL 33467 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	DIR
Name	LESSEL, JOHN C
Address	11601 PLEASANT RIDGE RD, 301
City-State-Zip:	LITTLE ROCK AR 72212

Title	GCO
Name	LESSEL, JOHN C
Address	11601 PLEASANT RIDGE RD, 301
City-State-Zip:	LITTLE ROCK AR 72212

Title	DIR
Name	METCALF, DAVID S
Address	6555 SANGER ROAD, STE 200
City-State-Zip:	ORLANDO FL 32827

Title	CHAI
Name	METCALF, DAVID S
Address	6555 SANGER ROAD, STE 200
City-State-Zip:	ORLANDO FL 32827

Title	D
Name	HOOVER, MAX W
Address	6555 SANGER ROAD #200
City-State-Zip:	ORLANDO FL 32827

Title	CEO
Name	HOOVER, MAX W
Address	6555 SANGER ROAD #200
City-State-Zip:	ORLANDO FL 32827

*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: MAX HOOVER****CEO****04/27/2021**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date