

**2021 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P20000094991

**Entity Name:** LINDA RIZZO, INC.

**Current Principal Place of Business:**

1200 OAKLEY SEAVER DR #109  
CLERMONT, FL 34711

**Current Mailing Address:**

15443 LAKE LITTLE RD  
CLERMONT, FL 34715 US

**FEI Number: 85-4272179**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

HUIE, JAY  
225 E. ROBINSON STREET  
SUITE 570  
ORLANDO, FL 32801 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           | PVST                       | Title           | D                          |
| Name            | RIZZO, LINDA               | Name            | RIZZO, LINDA               |
| Address         | 1200 OAKLEY SEAVER DR #109 | Address         | 1200 OAKLEY SEAVER DR #109 |
| City-State-Zip: | CLERMONT FL 34711          | City-State-Zip: | CLERMONT FL 34711          |

*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: LINDA RIZZO** \_\_\_\_\_

**PVST**

**02/04/2021**

Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_ Date