

2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P22000003742

Entity Name: 460 SHINN AVE, INC.**Current Principal Place of Business:**460 SHINN AVENUE
WEST MELBOURNE, FL 32904**Current Mailing Address:**383 BROCKWAY ROAD
OWENS CROSS ROADS, AL 35763 US**FEI Number:** 87-4518602**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**ALRON CORPS, INC.
3990 MINTON ROAD
MELBOURNE, FL 32904 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	DPS
Name	KOBISHOP, AMANDA
Address	383 BROCKWAY ROAD
City-State-Zip:	OWENS CROSS ROADS AL 35763

Title	DVP
Name	DAVIDSON, JASON
Address	295 PALMAS INN WAY SUITE 104-177
City-State-Zip:	HUMACAO AL 00791

Title	DVP
Name	KOBISHOP, JASON
Address	383 BROCKWAY ROAD
City-State-Zip:	OWENS CROSS ROADS AL 35763

Title	DT
Name	DAVIDSON, HEATHER
Address	295 PALMAS INN WAY SUITE 104-177
City-State-Zip:	HUMACAO AL 00791

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: AMANDA KOBISHOP**PRESIDENT****04/03/2023**_____
Electronic Signature of Signing Officer/Director Detail_____
Date