

**2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P22000071195

**Entity Name:** CAL FENCING & AG SERVICES INC

**Current Principal Place of Business:**

16371 SE 117TH AVE  
WEIRSDALE, FL 32195

**Current Mailing Address:**

16371 SE 117TH AVE  
WEIRSDALE, FL 32195 US

**FEI Number:** 92-0376222

**Certificate of Status Desired:** No

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

LEE, JENNIFER  
16371 SE 117TH AVE  
WEIRSDALE, FL 32195 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 LEE, CHASE A  
Address 16371 SE 117TH AVE  
City-State-Zip: WEIRSDALE FL 32195

Title P  
Name LEE, CHAD  
Address 16371 SE 117TH AVE  
City-State-Zip: WEIRSDALE FL 32195

Title TRE  
Name LEE, CHAD  
Address 16371 SE 117TH AVE  
City-State-Zip: WEIRSDALE FL 32195

Title SEC  
Name LEE, CHAD  
Address 16371 SE 117TH AVE  
City-State-Zip: WEIRSDALE FL 32195

Title VP  
Name LEE, CHASE A  
Address 16371 SE 117TH AVE  
City-State-Zip: WEIRSDALE FL 32195

*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:** CHAD LEE

**PRESIDENT**

**04/22/2024**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date