

**2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P23000065439

**Entity Name:** JACQUELYN TURNAGE, PA

**Current Principal Place of Business:**

5988 SAWGRASS POINT DR  
PORT ORANGE, FLORIDA, UNITED, FL 32128

**Current Mailing Address:**

5988 SAWGRASS POINT DR  
PORT ORANGE, FLORIDA, UNITED, FL 32128

**FEI Number:** 84-4711002

**Certificate of Status Desired:** No

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

TURNAGE, JACQUELYN N  
5988 SAWGRASS POINT DR  
PORT ORANGE, FLORIDA, UNITED, FL 32128 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 P  
Name TURNAGE, JACQUELYN  
Address 5988 SAWGRASS POINT DR  
City-State-Zip: PORT ORANGE, FLORIDA, UNITED FL 32128

Title VP  
Name HOLLAND, DEBBIE LEE  
Address 2741 NE 30TH AVE  
City-State-Zip: LIGHTHOUSE POINT FL 33064

*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:** JACQUELYN TURNAGE

**PRESIDENT**

**04/30/2024**

Electronic Signature of Signing Officer/Director Detail

Date