	entity submits this statement for the purpose of changing its NINA MAZZETTI Electronic Signature of Registered Agent	registered office or regis	tered agent, or both, in the State of F	03/09/2023 Date
Officer/Direc Title Name	PD MAZZETTI, NINA	Title Name	V CERVELLI, RONALD	
Address City-State-Zip:	4090 HODGES BLVD 1712 JACKSONVILLE FL 32224	Address City-State-Zip:	647 RIO DEL NORTE RD ST AUGUSTINE FL 32095	

4090 HODGES BLVD 1712 JACKSONVILLE, FL 32224 US

## FEI Number: 59-3495776

## Name and Address of Current Registered Agent:

MAZZETTI, NINA 19 1/2 ST. GEORGE STREET ST AUGUSTINE, FL 32080 US

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: NINA MAZZETTI

Electronic Signature of Signing Officer/Director Detail

03/09/2023

## FILED Mar 09, 2023 Secretary of State 2784520374CC

Certificate of Status Desired: No

**2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT** 

DOCUMENT# P98000019157

Entity Name: MILLTOP TAVERN, INC.

## **Current Principal Place of Business:**

19 1/2 ST. GEORGE STREET ST AUGUSTINE, FL 32084

**Current Mailing Address:** 

Date