

**2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# S33645

**Entity Name:** LYNN REECE ENTERPRISES, INC.

**Current Principal Place of Business:**

2436 OLD SAMSULA RD  
PORT ORANGE, FL 32128

**Current Mailing Address:**

2436 OLD SAMSULA RD  
PORT ORANGE, FL 32128 US

**FEI Number:** 59-6960951

**Certificate of Status Desired:** No

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

REECE, LYNN  
2436 OLD SAMSULA RD  
PORT ORANGE, 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 REECE, RANDY  
Address 2436 OLD SAMSULA RD  
City-State-Zip: PORT ORANGE FL 32128

Title VP  
Name REECE, LYNN  
Address 2436 OLD SAMSULA RD  
City-State-Zip: PORT ORANGE FL 32128

*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:** RANDY REECE

**PRESIDENT**

**03/17/2019**

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

\_\_\_\_\_  
Date