

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L22000473068

**Entity Name:** JNJ GOFER SERVICES LLC

**Current Principal Place of Business:**

5 PINE SHADOWS TRAIL  
ORMOND BEACH, FL 32174

**Current Mailing Address:**

5 PINE SHADOWS TRAIL  
ORMOND BEACH, FL 32174 UN

**FEI Number:** 92-1030108

**Certificate of Status Desired:** No

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

PETRICK, JORDAN D  
5 PINE SHADOWS TRAIL  
ORMOND BEACH, FL 32174 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

**Authorized Person(s) Detail :**

Title MGR  
Name PETRICK, JORDAN D  
Address 5 PINE SHADOWS TRAIL  
City-State-Zip: ORMOND BEACH FL 32174

Title MGR  
Name PETRICK, JOSHUA D  
Address 5 PINE SHADOWS TRAIL  
City-State-Zip: ORMOND BEACH FL 32174

Title MGR  
Name HUGUENIN, NICOLAS T  
Address 170 APPALOOSA LN  
City-State-Zip: ORMOND BEACH FL 32174

*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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** JORDAN PETRICK

MGR

03/07/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date