

2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N18000008672

Entity Name: OPTIMAL FAMILY SERVICES, INC.**Current Principal Place of Business:**7643 GATE PRKWY #104-579
JACKSONVILLE, FL 32256**Current Mailing Address:**7643 GATE PRKWY #104-579
JACKSONVILLE, FL 32256 US**FEI Number:** 83-1615747**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**LEGALINC CORPORATE SERVICES INC.
5237 SUMMERLIN COMMONS SUITE 400
FORT MYERS, FL 33907 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:** PATTY SCLIMENTI

04/19/2022

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	CEO
Name	BARRIS, LAKEISHA
Address	3107 FOX SQUIRREL DR
City-State-Zip:	ORANGE PARK FL 32073

Title	PD
Name	BARRIS, LAKEISHA
Address	3107 FOX SQUIRREL DR
City-State-Zip:	ORANGE PARK FL 32073

Title	D
Name	BRIGHT, LAKIA
Address	575 OAKLEAF PLANTATION PARKWAY
City-State-Zip:	ORANGE PARK FL 32073

Title	D
Name	MOORE, BETTY
Address	13931 NE 222ND PLACE
City-State-Zip:	RAIFORD FL 32083

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: LAKEISHA BARRIS

CEO

04/19/2022

Electronic Signature of Signing Officer/Director Detail

Date