

**2025 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 299025

**Entity Name:** OSSI'S APOTHECARY, INC.

**Current Principal Place of Business:**

9852 BAYMEADOWS RD  
JACKSONVILLE, FL 32256

**Current Mailing Address:**

9852 BAYMEADOWS RD  
JACKSONVILLE, FL 32256 US

**FEI Number:** 59-1148287

**Certificate of Status Desired:** No

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

OSSI, SUE  
9852 BAYMEADOWS RD  
JACKSONVILLE, FL 32256 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:** SUE OSSI

02/06/2025

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title PD  
Name OSSI, SUE  
Address 947 ORIENTAL GARDENS RD  
City-State-Zip: JACKSONVILLE FL

Title S  
Name MCCALL, LISA O  
Address 9852 BAYMEADOWS RD  
City-State-Zip: JACKSONVILLE FL

Title VP  
Name OSSI, DONNA  
Address 9852 BAYMEADOWS RD  
City-State-Zip: JACKSONVILLE FL

*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:** SUE OSSI

**PRES**

02/06/2025

Electronic Signature of Signing Officer/Director Detail

Date