

**2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 368538

**Entity Name:** JEFFREY-ALLEN, INC.

**Current Principal Place of Business:**

4401 NORTH US HIGHWAY 301  
TAMPA, FL 33610

**Current Mailing Address:**

P. O. BOX 891359  
TAMPA, FL 33689 US

**FEI Number:** 59-1302702

**Certificate of Status Desired:** No

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

SVERDLOW, JEFFREY C  
4401 NORTH US HIGHWAY 301  
TAMPA, FL 33610 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 CM  
Name SVERDLOW, JEFFREY C  
Address 1521 51ST ST WEST  
City-State-Zip: BRADENTON FL 34209

Title P  
Name SVERDLOW, BENJAMIN R  
Address 6635 CURRENT DRIVE  
City-State-Zip: APOLLO BEACH FL 33572

Title DS  
Name SVERDLOW, MARLA M  
Address 1521 51ST ST WEST  
City-State-Zip: BRADENTON FL 34209

Title VT  
Name SVERDLOW, CRAIG A  
Address 5963 CAYMUS LOOP  
City-State-Zip: WINDERMERE FL 34786

Title D  
Name SVERDLOW, CHRISTINE M  
Address 915 SPRING LAKE BLVD  
City-State-Zip: BRADENTON FL 34210

*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:** CAREY BISHOP

**CONTROLLER**

**03/30/2023**

Electronic Signature of Signing Officer/Director Detail

Date