

2021 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 460604

Entity Name: A. J. SULLIVAN OF FLORIDA, INC.**Current Principal Place of Business:**227 N W AVE L
BELLE GLADE, FL 33430-0460**Current Mailing Address:**BOX 490
BELLE GLADE, FL 33430-0460**FEI Number:** 59-1559114**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**DUFF, GENE
227 NW AVENUE L
BELLE GLADE, FL 33430 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 SD
Name HUNDLEY, JOHN
Address ST. ROAD 80
City-State-Zip: BELLE GLADE FL 33430Title PD
Name SCHLECHTER, JOHN
Address 1900 16TH ST
City-State-Zip: BELLE GLADE, FL 00000Title AS
Name DUFF, GENE
Address 227 N W AVE L
City-State-Zip: BELLE GLADE FL 33430

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: GENE DUFF

ASEC

01/12/2021

Electronic Signature of Signing Officer/Director Detail_____
Date