

2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04795

Entity Name: ELLISON SERVICE CORPORATION**Current Principal Place of Business:**C/O GARY SWICK
8390 CURRENCY DRIVE SUITE 2
RIVIERA BEACH, FL 33404**Current Mailing Address:**C/O GARY SWICK
8390 CURRENCY DRIVE SUITE 2
RIVIERA BEACH, FL 33404 US**FEI Number:** 59-2042208**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**SWICK, GARY
C/O GARY SWICK
8390 CURRENCY DRIVE SUITE 2
RIVIERA BEACH, FL 33404 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:** GARY SWICK

04/27/2020

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	D
Name	ELLISON, PETER
Address	C/O GARY SWICK 8390 CURRENCY DRIVE SUITE 2
City-State-Zip:	RIVIERA BEACH FL 33404

Title	DPT
Name	SWICK, GARY R.
Address	C/O GARY SWICK 8390 CURRENCY DRIVE SUITE 2
City-State-Zip:	RIVIERA BEACH FL 33404

Title	DVS
Name	SWICK, JEANINE
Address	C/O GARY SWICK 8390 CURRENCY DRIVE SUITE 2
City-State-Zip:	RIVIERA BEACH FL 33404

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: GARY SWICK

PRESIDENT

04/27/2020

Electronic Signature of Signing Officer/Director Detail

Date