	l entity submits this statement for the purpose of changing its			
SIGNATURE	: JOHN P PISANI			04/12/2019
	Electronic Signature of Registered Agent			Date
Officer/Director Detail :				
Title	Р	Title	ASST. SECRETARY	
Name	PISANI, JOHN P	Name	PISANI, GENA L	
Address	PO BOX 2152	Address	1539 NE 8TH AVE	
City-State-Zip:	BELLEVIEW FL 34421	City-State-Zip:	OCALA FL 34470	
Title	ASST. SECRETARY			
Name	SUNDBERG, LARA K			
Address	PO BOX 2152			

PO BOX 2152 BELLEVIEW, FL 34421 US

Current Principal Place of Business:

FEI Number: 59-2362944

Name and Address of Current Registered Agent:

PISANI, JOHN P 6271 SE 121ST PLACE BELLEVIEW, FL 34420 US

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: JOHN PISANI

Electronic Signature of Signing Officer/Director Detail

Current Mailing Address:

1539 NE 8TH AVE OCALA, FL 34470

City-State-Zip: BELLEVIEW FL 34421

2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT DOCUMENT# G88454

Entity Name: JOHN PAUL FOOD SERVICE CORPORATION

FILED Apr 12, 2019 Secretary of State 5195007724CC

Certificate of Status Desired: No

04/12/2019

Date