## **2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# J55547

Entity Name: JERRY FIXEL, INC.

**Current Principal Place of Business:** 

MICHAEL FIXEL 540 FRUIT COVE RD JACKSONVILLE, FL 32259

## **Current Mailing Address:**

MICHAEL FIXEL 540 FRUIT COVE RD JACKSONVILLE, FL 32259

FEI Number: 59-2757579 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

FIXEL, MICHAEL 540 FRUIT COVE RD. JACKSONVILLE, FL 32259 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

FILED Apr 30, 2018

**Secretary of State** 

CC6716007088

## Officer/Director Detail:

Title PDT Title S

Name FIXEL, MICHAEL Name FIXEL, AVA

Address 540 FRUIT COVE RD Address 540 FRUIT COVE RD

City-State-Zip: JACKSONVILLE FL 32259 City-State-Zip: JACKSONVILLE FL 32259

Title VP

Name OSTERER, MORRIE

Address 2667 SPREADING OAKS LANE

City-State-Zip: JAX FL 32223

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: MICHAEL FIXEL PRESIDENT 04/30/2018