## 2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J63850

Entity Name: LINCOLN COMMERCIAL PROPERTIES, INC.

# **Current Principal Place of Business:**

LINCOLN COMMERCIAL 4884 FRONT ST PONCE INLET, FL 32127

# **Current Mailing Address:**

LINCOLN COMMERCIAL P.O. BOX 290727 PORT ORANGE, FL 32129 US

FEI Number: 59-2805831 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

JOHNSON, LYDER 4884 FRONT ST PONCE INLET, FL 32127 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** Jan 19, 2017

**Secretary of State** 

CC6389770115

#### Officer/Director Detail:

Title	PT	Title	VS

JOHNSON, LYDER JOHNSON, SIMONE S. Name Name 4884 FRONT ST 4884 FRONT ST Address Address

PONCE INLET FL 32127 City-State-Zip: PONCE INLET FL 32127 City-State-Zip:

VΡ Title Title AS

JOHNSON, SIMONE S Name JOHNSON, SIMONE S Name 4884 FRONT ST Address 4884 FRONT ST Address

City-State-Zip: PONCE INLET FL 32127 City-State-Zip: PONCE INLET FL 32127

**OFFICER** Title Title **OFFICER** 

Name JOHNSON, LINCOLN R Name RINALDI, CEARRA R Address LINCOLN COMMERCIAL Address LINCOLN COMMERCIAL

4884 FRONT ST 4884 FRONT ST

City-State-Zip: PONCE INLET FL 32127 City-State-Zip: PONCE INLET FL 32127

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.