2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 06, 2024
Secretary of State
5748982983CC

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Entity Name: LINCOLN COMMERCIAL PROPERTIES, INC.

Current Principal Place of Business:

LINCOLN COMMERCIAL
5275 SOUTH ATLANTIC AV SUITE 1205
NEW SMYRNA BEACH , FL 32169

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
LINCOLN COMMERCIAL
5275 SOUTH ATLANTIC AV SUITE 1205
NEW SMYRNA BEACH , FL 32169 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	PT	Title	VS
Name	JOHNSON, LYDER	Name	JOHNSON, SIMONE S.
Address	LINCOLN COMMERCIAL P.O. BOX 290727	Address	LINCOLN COMMERCIAL P.O. BOX 290727
City-State-Zip:	PORT ORANGE FL 32129	City-State-Zip:	PORT ORANGE FL 32129
Title	AS	Title	VP
Name	JOHNSON, SIMONE S	Name	JOHNSON, SIMONE S
Address	LINCOLN COMMERCIAL P.O. BOX 290727	Address	LINCOLN COMMERCIAL P.O. BOX 290727
City-State-Zip:	PORT ORANGE FL 32129	City-State-Zip:	PORT ORANGE FL 32129
Title	OFFICER	Title	OFFICER
Name	RINALDI, CEARRA R	Name	JOHNSON, LINCOLN R
Address	LINCOLN COMMERCIAL P.O. BOX 290727	Address	LINCOLN COMMERCIAL P.O. BOX 290727
City-State-Zip:	PORT ORANGE FL 32129	City-State-Zip:	PORT ORANGE FL 32129

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: LYDER JOHNSON PRESIDENT 03/06/2024

Electronic Signature of Signing Officer/Director Detail — Date