

2022 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J71875

Entity Name: ANSCRO, INC.**Current Principal Place of Business:**165 SOUTH LEE STREET
SUITE 100
LABELLE, FL 33935**Current Mailing Address:**165 SOUTH LEE STREET
SUITE 100
LABELLE, FL 33935 US**FEI Number:** 59-2806013**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**BURGER, ALAN M
505 S. FLAGLER DRIVE
SUITE 300
WEST PALM BEACH, FL 33401 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	DP	Title	DIRECTOR, VP
Name	ROYAL, STEVEN B	Name	ROYAL, DERIK C
Address	165 SOUTH LEE STREET SUITE 100	Address	165 SOUTH LEE STREET SUITE 100
City-State-Zip:	LABELLE FL 33935	City-State-Zip:	LABELLE FL 33935
Title	DIRECTOR, SECRETARY, TREASURER		
Name	ECHOLS, MARLA L		
Address	165 SOUTH LEE STREET SUITE 100		
City-State-Zip:	LABELLE FL 33935		

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: MARLA ECHOLS**SECRETARY/TREASURER** 04/30/2022_____
Electronic Signature of Signing Officer/Director Detail_____
Date