

2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L86259

Entity Name: IRVINE MECHANICAL, INC.**Current Principal Place of Business:**1500 N ORANGE BLOSSOM TR
ORLANDO, FL 32804**Current Mailing Address:**1500 N ORANGE BLOSSOM TRAIL
ORLANDO, FL 32804 US**FEI Number:** 59-3016720**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 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	CEO
Name	MAURER, LAWRENCE D
Address	2201 COLLEGE AVENUE
City-State-Zip:	DAVIE FL 33317

Title	EXECUTIVE VP
Name	REYNOLDS, STEPHEN
Address	550 S DIXIE HWY STE 300
City-State-Zip:	CORAL GABLES FL 33146

Title	VP
Name	IRVINE, CHARLES
Address	1500 N ORANGE BLOSSOM TRAIL
City-State-Zip:	ORLANDO FL 32804

Title	CFO
Name	KIRK, WILLIAM
Address	2201 COLLEGE AVENUE
City-State-Zip:	DAVIE FL 33317

Title	COO
Name	IRVINE, ALLEN
Address	2201 COLLEGE AVENUE
City-State-Zip:	DAVIE FL 33317

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: WILLIAM KIRK

CFO

04/02/2024

Electronic Signature of Signing Officer/Director Detail_____
Date