

2022 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000054549

Entity Name: ASSOCIATED CONSTRUCTION AND DEVELOPMENT, INC.**Current Principal Place of Business:**7999 MERCANTILE STREET
UNIT 15
NORTH FORT MYERS, FL 33917**Current Mailing Address:**P.O. BOX 3443
NORTH FORT MYERS, FL 33918**FEI Number: 65-1017930****Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**AVERILL, JOHN P
7999 MERCANTILE STREET
UNIT 15
NORTH FORT MYERS, FL 33917 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	P
Name	AVERILL, BOBBI J
Address	7999 MERCANTILE STREET, UNIT 15
City-State-Zip:	NORTH FORT MYERS FL 33917

Title	VP
Name	AVERILL, JOHN P
Address	7999 MERCANTILE STREET, UNIT 15
City-State-Zip:	NORTH FORT MYERS FL 33917

Title	S/T/VP
Name	AVERILL, BOBBI J
Address	7999 MERCANTILE STREET, UNIT 15
City-State-Zip:	NORTH FORT MYERS FL 33917

Title	VP
Name	AVERILL, KRYSTAL N
Address	7999 MERCANTILE STREET, UNIT 15
City-State-Zip:	NORTH FORT MYERS FL 33917

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: BOBBI AVERILL**PRESIDENT****01/10/2022**_____
Electronic Signature of Signing Officer/Director Detail_____
Date