

**2025 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P00000095038

**Entity Name:** SPECIALIZED PROPERTY SERVICES, INC.

**Current Principal Place of Business:**

9605 E US HIGHWAY 92  
TAMPA, FL 33610

**Current Mailing Address:**

9605 E US HIGHWAY 92  
TAMPA, FL 33610 US

**FEI Number: 59-3674931**

**Certificate of Status Desired: Yes**

**Name and Address of Current Registered Agent:**

CARNEY, DANIEL  
9605 E US HIGHWAY 92  
TAMPA, FL 33610 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 CARNEY, SEAN  
Address 9605 E US HIGHWAY 92  
City-State-Zip: TAMPA FL 33610

Title V  
Name CARNEY, DANIEL  
Address 9605 E US HIGHWAY 92  
City-State-Zip: TAMPA FL 33610

Title T  
Name CARNEY, DANIEL  
Address 9605 E US HIGHWAY 92  
City-State-Zip: TAMPA FL 33610

Title S  
Name CARNEY, SEAN  
Address 9605 E US HIGHWAY 92  
City-State-Zip: TAMPA FL 33610

Title V  
Name MARTUCCI, DANIEL  
Address 9605 E US HIGHWAY 92  
City-State-Zip: TAMPA FL 33610

*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: SEAN CARNEY**

**CEO**

**02/21/2025**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date