

**2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P01000013919

**Entity Name:** YOUR PERSONAL CARPENTER, INC.

**Current Principal Place of Business:**

5374 FIRST COAST HWY  
SUITE 3  
AMELIA ISLAND, FL 32034

**FILED**  
**Feb 02, 2020**  
**Secretary of State**  
**1879642961CC**

**Current Mailing Address:**

5174 FIRST COAST HIGHWAY  
SUITE 3  
AMELIA ISLAND, FL 32034 US

**FEI Number: 59-3557142**

**Certificate of Status Desired: No**

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

WILLIAMS, JAMES M  
5174 FIRST COAST HIGHWAY  
SUITE 3  
AMELIA ISLAND, FL 32034 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           PTD  
Name           WILLIAMS, JAMES MICHAEL  
Address        96226 GRANDE OAKS LN  
City-State-Zip: FERNANDINA BEACH FL 32034

Title           VSD  
Name           WILLIAMS, JAMES MICHAEL  
Address        96226 GRANDE OAKS LN  
City-State-Zip: FERNANDINA BEACH FL 32034

*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: JAMES MICHAEL WILLIAMS**

**PTD**

**02/02/2020**

\_\_\_\_\_

Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_

Date