# 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.

PRESIDENT

#### SIGNATURE: JOHN BRUCE

Electronic Signature of Signing Officer/Director Detail

DOCUMENT# P01000030356

Entity Name: J.L. BRUCE CONSTRUCTION COMPANY INC.

### **Current Principal Place of Business:**

3505 AVION WOODS CT UNIT 903 NAPLES, FL 34104

#### Current Mailing Address:

P.O. BOX 1602 NAPLES, FL 34106

#### FEI Number: 59-3716015

## Name and Address of Current Registered Agent:

Electronic Signature of Registered Agent

BRUCE, JOHN LPRES 3505 AVION WOODS CT UNIT903 NAPLES, FL 34104 US

**Officer/Director Detail :** 

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:

Title	PRES	Title	VP
Name	BRUCE, JOHN L	Name	GUESS, DENNIS JAMES
Address	3505 AVION WOODS CT UNIT 903	Address	3505 AVION WOODS CT UNIT 903
City-State-Zip:	NAPLES FL 34104	City-State-Zip:	NAPLES FL 34104

Certificate of Status Desired: No

FILED Jun 13, 2021 Secretary of State 9661746819CC

Date

06/13/2021

Date