

**2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P01000095237

**Entity Name:** LYNNE MIKE, INC.

**Current Principal Place of Business:**

8730 NW 230TH ST  
MICANOPY, FL 32667

**Current Mailing Address:**

P.O. BOX 771  
MICANOPY, FL 32667 US

**FEI Number:** 65-1141409

**Certificate of Status Desired:** No

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

FAIGMAN, JEFFREY A  
8730 NW 230TH ST  
MICANOPY, FL 32667 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            PRESIDENT  
Name            FAIGMAN, JEFFREY A  
Address        8730 NW 230TH ST  
City-State-Zip: MICANOPY FL 32667

Title            VP  
Name            FAIGMAN, MATTHEW MICHAEL  
Address        8730 NW 230TH ST  
City-State-Zip: MICANOPY FL 32667

*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:** JEFFREY FAIGMAN

**PRESIDENT**

**01/24/2018**

Electronic Signature of Signing Officer/Director Detail

Date