

**2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P03000136515

**Entity Name:** JACOB A. BOLTON, INC.

**Current Principal Place of Business:**

306 BAY STREET  
AUBURNDALE, FL 33823

**Current Mailing Address:**

C/O TREASURER  
POST OFFICE BOX 13012  
TALLAHASSEE, FL 32317-3012

**FEI Number:** 61-1459953

**Certificate of Status Desired:** No

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

BOLTON, ANGIE JACOBS  
306 BAY STREET  
AUBURNDALE, FL 33823 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            BOLTON, JACOB A  
Address        306 BAY STREET  
City-State-Zip: AUBURNDALE FL 33823

Title            TREASURER  
Name            HERRING, JOY BOLTON  
Address        P.O.BOX 13012  
City-State-Zip: TALLAHASSEE FL 32317

Title            SECRETARY  
Name            BOLTON, ANGIE JACOBS  
Address        306 BAY STREET  
City-State-Zip: AUBURNDALE FL 33823

*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:** JACOB A BOLTON

**PRESIDENT**

**04/19/2019**

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

\_\_\_\_\_  
Date