

2022 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10000084558

Entity Name: MSP,INC.**Current Principal Place of Business:**341 WHITE OAK DRIVE
ALTAMONTE SPRINGS, FL 32701**Current Mailing Address:**341 WHITE OAK DRIVE
ALTAMONTE SPRINGS, FL 32701 US**FEI Number:** 90-0623667**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**SAMUEL PRICE, MORGAN
341 WHITE OAK DRIVE
ALTAMONTE SPRINGS, FL 32701 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	SAMUEL PRICE, MORGAN
Address	341 WHITE OAK DRIVE
City-State-Zip:	ALTAMONTE SPRINGS FL 32701

Title	VP
Name	SAMUEL PRICE, MORGAN
Address	341 WHITE OAK DRIVE
City-State-Zip:	ALTAMONTE SPRINGS FL 32701

Title	S
Name	SAMUEL PRICE, MORGAN
Address	341 WHITE OAK DRIVE
City-State-Zip:	ALTAMONTE SPRINGS FL 32701

Title	S
Name	SAMUEL PRICE, MORGAN
Address	341 WHITE OAK DRIVE
City-State-Zip:	ALTAMONTE SPRINGS FL 32791

Title	T
Name	SAMUEL PRICE, MORGAN
Address	341 WHITE OAK DRIVE
City-State-Zip:	ALTAMONTE SPRINGS FL 32701

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: MORGAN SAMUEL PRICE**P****01/06/2022**

Electronic Signature of Signing Officer/Director Detail

Date