

**2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P13000036385

**Entity Name:** J. WILLETTE ENTERPRISES INC.

**Current Principal Place of Business:**

10380 SW VILLAGE CENTER DR  
PT ST LUCIE, FL 34987

**Current Mailing Address:**

10380 SW VILLAGE CENTER DR  
PT ST LUCIE, FL 34987 US

**FEI Number:** 46-2642141

**Certificate of Status Desired:** No

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

WILLETTE, JASON  
2413 SW PAGE CIRCLE  
PT ST LUCIE, FL 34953 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[	Title	VP
Name	WILLETTE, JASON	Name	WILLETTE, JILL
Address	2413 SW PAGE CIRCLE	Address	2413 SW PAGE CIRCLE
City-State-Zip:	PT ST LUCIE FL 34953	City-State-Zip:	PT ST LUCIE FL 34953

*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:** JASON WILLETTE

**PRESIDENT**

**01/22/2023**

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

\_\_\_\_\_  
Date