

**2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P14000003565

**Entity Name:** Z S CARPENTRY INC**Current Principal Place of Business:**2621 UNIVERSAL DR  
RUSKIN, FL 33570**Current Mailing Address:**3706 EDWARD BUTLER AVE  
RUSKIN, FL 33570 US**FEI Number:** 46-4528163**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**KNOWLES-HINKLEY, ANGELA  
3706 EDWARD BUTLER AVE  
RUSKIN, FL 33570 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            | KNOWLES-HINKLEY, ANGELA |
| Address         | 3706 EDWARD BUTLER AVE  |
| City-State-Zip: | RUSKIN FL 33570         |

|                 |                     |
|-----------------|---------------------|
| Title           | TREASURER           |
| Name            | KELLER, KYLE        |
| Address         | 12518 SPOTTSWOOD DR |
| City-State-Zip: | RIVERVIEW FL 33579  |

|                 |                            |
|-----------------|----------------------------|
| Title           | S                          |
| Name            | VAN DYK, MICHAEL           |
| Address         | 2201 US HWY 41 S<br>LOT 56 |
| City-State-Zip: | RUSKIN FL 33570            |

|                 |                        |
|-----------------|------------------------|
| Title           | VP                     |
| Name            | HINKLEY, DEAN          |
| Address         | 3706 EDWARD BUTLER AVE |
| City-State-Zip: | RUSKIN FL 33570        |

*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:** DEAN ERIC HINKLEY

VP

04/08/2023

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