

**2022 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P16000035188

**Entity Name:** MAGNOLIA HOME REPAIR INC

**Current Principal Place of Business:**

548 MARY ESTHER CUTOFF  
APT #235  
FT WALTON BEACH, FL 32547

**Current Mailing Address:**

548 MARY ESTHER CUTOFF  
APT #235  
FT WALTON BEACH, FL 32547

**FEI Number:** 81-2336676

**Certificate of Status Desired:** No

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

WILDER, JAMES R  
548 MARY ESTHER CUT OFF  
235  
FT WALTON BEACH, FL 32548 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,D  
Name MILLS, JOSEPH P  
Address 548 MARY ESTHER CUTOFF #235  
City-State-Zip: FT WALTON BEACH FL 32547

Title ASST. SECRETARY  
Name MILLS, LINDA LEE  
Address 548 MARY ESTHER CUTOFF  
APT #235  
City-State-Zip: FT WALTON BEACH FL 32547

Title SECRETARY  
Name TAYLOR, DONNA  
Address 548 MARY ESTHER CUTOFF  
APT #235  
City-State-Zip: FT WALTON BEACH FL 32547

*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:** JOSEPH MILLS

02/07/2022

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