**2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

**FILED**
**Mar 26, 2024**
**Secretary of State**
**9235806169CC**

DOCUMENT# P18000003662

**Entity Name:** JACK HYLES, INC.

**Current Principal Place of Business:**

184 CIRCUIT RIDER RD
GREEN COVE SPRINGS, FL 32043

**Current Mailing Address:**

184 CIRCUIT RIDER RD
GREEN COVE SPRINGS, FL 32043 US

**FEI Number: 82-4038675**

**Certificate of Status Desired:** No

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

FULLER, BARRY J
2301 PARK AVENUE, SUITE 404
ORANGE PARK, FL 32073 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 | DIR | Title | DIR |
| Name | HYLES, DAVID J | Name | NEAL, GREGORY M |
| Address | 429 HUDSON JONES ROAD | Address | 184 CIRCUIT RIDER RD |
| City-State-Zip: | COCHRAN GA 31014 | City-State-Zip: | GREEN COVE SPRINGS FL 32043 |

*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: DAVID J HYLES DIR 03/26/2024

Electronic Signature of Signing Officer/Director Detail — Date