

**2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P18000091320

**Entity Name:** JAMIE D. SHARPE, INC.

**Current Principal Place of Business:**

6393 NORTH WEST COUNTY ROAD 125  
LAWTEY, FL 32058

**Current Mailing Address:**

6393 NORTH WEST COUNTY ROAD 125  
LAWTEY, FL 32058

**FEI Number:** 83-2447840

**Certificate of Status Desired:** Yes

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

SHARPE, JAMIE D  
6393 NORTH WEST COUNTY ROAD 125  
LAWTEY, FL 32058 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 SHARPE, JAMIE D  
Address 6393 NORTH WEST COUNTY ROAD  
125  
City-State-Zip: LAWTEY FL 32058

*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:** JAMIE D. SHARPE

PRESIDENT

05/01/2019

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

\_\_\_\_\_ Date