

**2022 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P19000033984

**Entity Name:** TRADITIONAL REMODELING SERVICES, INC.

**Current Principal Place of Business:**

215 S METEOR AVE  
CLEARWATER, FL 33765

**Current Mailing Address:**

215 S METEOR AVE  
CLEARWATER, FL 33765 US

**FEI Number:** 83-4547191

**Certificate of Status Desired:** No

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

JOSELYN, KELLY  
215 S METEOR AVE  
CLEARWATER, FL 33765 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	JOSELYN, KELLY	Name	KRIZAN, GABRIEL
Address	215 S METEOR AVE	Address	215 S METEOR AVE
City-State-Zip:	CLEARWATER FL 33765	City-State-Zip:	CLEARWATER FL 33765

*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:** KELLY JOSSELYN

**PRESIDENT**

**04/30/2022**

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

\_\_\_\_\_  
Date