

**2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P19000071600

**Entity Name:** GOODE AUDIO VIDEO AUTOMATION INC.

**Current Principal Place of Business:**

1309 ST. JOHNS BLUFF RD N  
STE 104  
JACKSONVILLE, FL 32225

**Current Mailing Address:**

1309 ST. JOHNS BLUFF RD N  
STE 104  
JACKSONVILLE, FL 32225 US

**FEI Number:** 84-3101202

**Certificate of Status Desired:** No

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

LEGALINC CORPORATE SERVICES INC.  
476 RIVERSIDE AVE.  
JACKSONVILLE, FL 32202 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  
Name            GOODE, STEVEN  
Address        1309 ST. JOHNS BLUFF RD N  
                  STE 104  
City-State-Zip: JACKSONVILLE FL 32225

Title            DIR  
Name            GOODE, MARGARET  
Address        1309 ST. JOHNS BLUFF RD N  
                  STE 104  
City-State-Zip: JACKSONVILLE FL 32225

*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:** STEVEN GOODE

**DIRECTOR**

**01/23/2023**

Electronic Signature of Signing Officer/Director Detail

Date