# 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.

VP

#### SIGNATURE: NAKIESHA PUMILIA

Electronic Signature of Signing Officer/Director Detail

Current Principal Place of Business:

Entity Name: LIL JOHNNYS HOME REPAIR SERVICE INC

226 WASHINGTON LN GREEN COVE SPRINGS, FL 32043

DOCUMENT# P20000039099

#### **Current Mailing Address:**

226 WASHINGTON LN GREEN COVE SPRINGS, FL 32043 US

# FEI Number: 85-1089121

**Officer/Director Detail :** 

## Name and Address of Current Registered Agent:

Electronic Signature of Registered Agent

SANKS, ROSALYN 102 NORTH ROBERTS STREET GREEN COVE SPRINGS, FL 32043 US

PRESIDENT

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.

Title

VP

#### SIGNATURE:

Title

Name	WILLIS, HAYWARD	Name	PUMILIA, NAKIESHA
Address	226 WASHINGTON LN	Address	9211 CRESCENT LANE
City-State-Zip:	GREEN COVE SPRINGS FL 32043	City-State-Zip:	LA PATA MD 20646

2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT

# Certificate of Status Desired: Yes

04/30/2023

## FILED Apr 30, 2023 Secretary of State 6599245062CC

Date

Date