

2021 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000017245

Entity Name: HURRICANE AVIARIES, INC.**Current Principal Place of Business:**3319 E ROAD
LOXAHATCHEE, FL 33470**Current Mailing Address:**3319 E ROAD
LOXAHATCHEE, FL 33470 US**FEI Number:** 65-0393702**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CLUBB, SUSAN L
3319 E ROAD
LOXAHATCHEE, FL 33470 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	PD
Name	CLUBB, SUSAN L
Address	3319 E ROAD
City-State-Zip:	LOXAHATCHEE FL 33470

Title	VP
Name	CLUBB, AUSTIN R
Address	3319 E ROAD
City-State-Zip:	LOXAHATCHEE FL 33470

Title	DIR
Name	CLUBB, JEREMY M
Address	3319 E ROAD
City-State-Zip:	LOXAHATCHEE FL 33470

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: SUSAN CLUBB

PRESIDENT

02/02/2021

Electronic Signature of Signing Officer/Director Detail_____
Date