

**2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P96000000829

**Entity Name:** THE DRISCOLL GROUP, INC.

**Current Principal Place of Business:**

8825 PERIMETER PARK BLVD  
SUITE 604  
JACKSONVILLE, FL 32216

**FILED**  
**Jan 11, 2023**  
**Secretary of State**  
**1388408696CC**

**Current Mailing Address:**

8825 PERIMETER PARK BLVD  
SUITE 604  
JACKSONVILLE, FL 32216 US

**FEI Number: 59-3355139**

**Certificate of Status Desired: No**

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

DRISCOLL, KEVIN  
8825 PERIMETER PARK BLVD  
SUITE 604  
JACKSONVILLE, FL 32216 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 DRISCOLL, KEVIN I  
Address 10219 SOUTHERN GLEN COURT  
City-State-Zip: JACKSONVILLE FL 32256

Title VP  
Name DRISCOLL, CORY J  
Address 4244 ST. JOHNS AVENUE  
City-State-Zip: JACKSONVILLE FL 32210

Title SECRETARY  
Name DRISCOLL, JEFF B  
Address 1249 HOLLYWOOD AVENUE  
City-State-Zip: JACKSONVILLE FL 32205

*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: KEVIN I DRISCOLL**

**PRESIDENT**

**01/11/2023**

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

\_\_\_\_\_  
Date