

2021 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000081723

Entity Name: J. RAWN ENTERPRISES, INC.**Current Principal Place of Business:**3848 162ND DRIVE NORTH
LOXAHATCHEE GROVES, FL 33470**Current Mailing Address:**3848 162ND DRIVE NORTH
LOXAHATCHEE GROVES, FL 33470 US**FEI Number:** 65-0697117**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**RAWN, JOHN D
3848 162ND DRIVE NORTH
LOXAHATCHEE GROVES, 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	RAWN, JOHN
Address	3848 162ND DRIVE NORTH
City-State-Zip:	LOXAHATCHEE GROVES FL 33470

Title	S
Name	RAWN, BONNIE J
Address	3848 162ND DRIVE NORTH
City-State-Zip:	LOXAHATCHEE GROVES FL 33470

Title	VP
Name	RAWN, JACK D
Address	3848 162ND DRIVE NORTH
City-State-Zip:	LOXAHATCHEE GROVES 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: JOHN RAWN

PD

03/16/2021

Electronic Signature of Signing Officer/Director Detail_____
Date