

2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 266021

Entity Name: FACT-O-BAKE, INC.**Current Principal Place of Business:**6030 CARLATUN ST
WESTERVILLE, OH 43081**Current Mailing Address:**6030 CARLATUN ST
WESTERVILLE, OH 43081 US**FEI Number:** 59-1006785**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**GUICE, MATTHEW L
6030 CARLATUN ST
WESTERVILLE, FL 43081 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 | ST |
| Name | GUICE, TRACY B. |
| Address | 6030 CARLATUN ST |
| City-State-Zip: | WESTERVILLE OH 43081 |

| | |
|-----------------|--------------------------|
| Title | VPD |
| Name | SMITH, MARGARET T |
| Address | 11064 TRALEE COURT SOUTH |
| City-State-Zip: | JACKSONVILLE FL 32221 |

| | |
|-----------------|---------------------|
| Title | VPD |
| Name | TAYLOR, DOUGLAS R |
| Address | 3615 BEBEE POINT DR |
| City-State-Zip: | THEODORE AL 36582 |

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: DOUGLAS R TAYLOR

VPD

02/26/2023

Electronic Signature of Signing Officer/Director Detail_____
Date