

2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P12000098345

Entity Name: TOUCHPOINT INNOVATIVE SOLUTIONS, INC.**Current Principal Place of Business:**22 HAMMOCK BEACH PKWY
PALM COAST, FL 32137**Current Mailing Address:**22 HAMMOCK BEACH PKWY
PALM COAST, FL 32137 US**FEI Number: 46-1534520****Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**HOLLEY, HOWARD
22 HAMMOCK BEACH PKWY
PALM COAST, FL 32137 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	C
Name	HOLLEY, HOWARD
Address	22 HAMMOCK BEACH PKWY
City-State-Zip:	PALM COAST FL 32137

Title	DIRECTOR
Name	KIMBELL, CHRISTIE
Address	22 HAMMOCK BEACH PKWY
City-State-Zip:	PALM COAST FL 32137

Title	P
Name	HOLLEY, BARBARA C
Address	22 HAMMOCK BEACH PKWY
City-State-Zip:	PALM COAST FL 32137

Title	D
Name	COATES, JEANNE
Address	111 TIGER PAW PATH
City-State-Zip:	YORKTOWN PA 23693

Title	D
Name	JONES, TELDRA
Address	22 HAMMOCK BEACH PKWY
City-State-Zip:	PALM COAST FL 32137

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: HOWARD M. HOLLEY**PRESIDENT****06/08/2020**_____
Electronic Signature of Signing Officer/Director Detail_____
Date