

**2018 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P29445

**Entity Name:** JACKI'S, INC.

**Current Principal Place of Business:**

4685 REVOLUTIONARY WAY  
WILLIAMSBURG, VA 23188

**Current Mailing Address:**

P.O. BOX 110  
LIGHTFOOT, VA 23090-0110 US

**FEI Number:** 59-2998980

**Certificate of Status Desired:** No

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

SORENSEN, JACKI  
51 BEACH STREET  
PONCE INLET, FL 32127 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	Title	DIRECTOR OF OPERATIONS
Name	SORENSEN, JACKI	Name	CHRISTINE S. MATTER
Address	51 BEACH ST	Address	P.O. BOX 110
City-State-Zip:	PONCE INLET FL 32127	City-State-Zip:	LIGHTFOOT VA 23090-0110

*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:** CHRISTINE S MATTER

**DIRECTOR OF  
OPERATIONS**

**01/16/2018**

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

\_\_\_\_\_  
Date