# 2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S10447

Entity Name: MACRAE'S OF HOMOSASSA, INC.

### **Current Principal Place of Business:**

5300 S. CHEROKEE WAY HOMOSASSA, FL 34448

## **Current Mailing Address:**

PO BOX 318 HOMOSASSA, FL 34487

# FEI Number: 59-3038991

### Name and Address of Current Registered Agent:

MACRAE, J. ALEXANDER 5300 S. CHEROKEE WAY HOMOSASSA, FL 34448 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 Reg	gistered Agent
-----------------------------	----------------

## Officer/Director Detail :

Title	D, PRESIDENT, TREASURER	Title	VP, SECRETARY
Name	MACRAE, J ALEXANDER	Name	MACRAE, PAMELA ANNE
Address	5300 SOUTH CHEROKEE WAY	Address	5300 SOUTH CHEROKEE WAY
City-State-Zip:	HOMOSASSA FL 34448	City-State-Zip:	HOMOSASSA FL 34448

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: J A MACRAE

PRES.

02/11/2019

Date

Electronic Signature of Signing Officer/Director Detail

Date

FILED Feb 11, 2019 Secretary of State 2138171356CC

Certificate of Status Desired: No