

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N17000004633

Entity Name: SHOWOFF, INC.**Current Principal Place of Business:**1010 GROVE DR.
NAPLES, FL 34120**Current Mailing Address:**1010 GROVE DR.
NAPLES, FL 34120 US**FEI Number:** 82-1816606**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**SCALLAN, ROBERT L
1010 GROVE DR.
NAPLES, FL 34120 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	P
Name	SCALLAN, ROBERT
Address	1010 GROVE DR.
City-State-Zip:	NAPLES FL 34120

Title	VP
Name	SCALLAN, LISA
Address	1010 GROVE DR.
City-State-Zip:	NAPLES FL 34120

Title	T
Name	SCALLAN, DYLAN
Address	1010 GROVE DR.
City-State-Zip:	NAPLES FL 34120

Title	S
Name	SCALLAN, HUNTER
Address	1010 GROVE DR.
City-State-Zip:	NAPLES FL 34120

Title	CC
Name	RIVERA, AMAURY
Address	550 8TH ST. NE
City-State-Zip:	NAPLES FL 34120

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: ROBERT SCALLAN**OWNER****02/21/2020**

Electronic Signature of Signing Officer/Director Detail

Date