

2019 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

02/18/2019

Electronic Signature of Signing Officer/Director Detail

Date