

**2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N22000012495

**Entity Name:** SANGGLORYDAGOD\_TAGGED INC

**Current Principal Place of Business:**

1906 PLANTATION KEY CIR  
APT 103  
BRANDON, FL 33511--4610

**Current Mailing Address:**

1866 JIM REDMAN PKWY #1050  
BRANDON, FL 33563

**FEI Number: NOT APPLICABLE**

**Certificate of Status Desired: No**

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

KITCHENS, WILLIAM III  
1866 JIM REDMAN PKWY #1050  
BRANDON, FL 33563 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 KITCHENS, WILLIAM III  
Address 1866 JIM REDMAN PKWY #1050  
City-State-Zip: PLANTCITY FL 33563

Title D  
Name SWAIN, EDDIE  
Address 1301 SR 60 WEST  
City-State-Zip: PLANTCITY FL 33567

Title D  
Name SYKES, SHANTEL  
Address 338 PARK SPRINGS CIR APT 104  
City-State-Zip: PLANTCITY FL 33563

Title D  
Name SWAIN, COURTNEY  
Address 1301 SR 60 WEST  
City-State-Zip: PLANTCITY FL 33567

*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: WILLIAM KITCHENS**

**P**

**04/29/2023**

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

\_\_\_\_\_  
Date