

2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 322780

Entity Name: GREAT BAY DISTRIBUTORS, INC.**Current Principal Place of Business:**2750 EAGLE AVENUE NORTH
ST. PETERSBURG, FL 33716**Current Mailing Address:**2750 EAGLE AVENUE NORTH
ST. PETERSBURG, FL 33716 US**FEI Number:** 59-1196133**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**PETRINI, RONALD R.
2750 EAGLE AVENUE NORTH
ST. PETERSBURG, FL 33716 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 CFO
Name RUBRIGHT, CRAIG
Address 2750 EAGLE AVENUE NORTH
City-State-Zip: ST. PETERSBURG FL 33716

Title T, D
Name SOKOLOWSKI, CLAUDIA
Address 2750 EAGLE AVENUE NORTH
City-State-Zip: ST. PETERSBURG FL 33716

Title VP
Name HO, SANDRA
Address 2750 EAGLE AVENUE NORTH
City-State-Zip: ST. PETERSBURG FL 33716

Title D
Name PETRINI, JOHN
Address 2750 EAGLE AVENUE NORTH
City-State-Zip: ST. PETERSBURG FL 33716

Title VP
Name CARMAN, WILLIAM
Address 2750 EAGLE AVENUE NORTH
City-State-Zip: ST. PETERSBURG FL 33716

Title P, D
Name PETRINI, RONALD R
Address 2750 EAGLE AVENUE NORTH
City-State-Zip: ST. PETERSBURG FL 33716

Title D
Name LOVELADY, JENNIFER
Address 2750 EAGLE AVENUE NORTH
City-State-Zip: ST. PETERSBURG FL 33716

Title D
Name SOKOLOWSKI, DOUGLAS J
Address 2750 EAGLE AVENUE NORTH
City-State-Zip: ST. PETERSBURG FL 33716

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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: CLAUDIA SOKOLOWSKI

01/08/2020

Electronic Signature of Signing Officer/Director Detail_____
Date

Officer/Director Detail Continued :

Title D
Name SOKOLOWSKI, MATTHEW R
Address 2750 EAGLE AVENUE NORTH
City-State-Zip: ST. PETERSBURG FL 33716

Title COO
Name PENLAND, SCOTT
Address 2750 EAGLE AVENUE NORTH
City-State-Zip: ST. PETERSBURG FL 33716