

**2016 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 S, D  
Name FOCARDI, NINA  
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 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 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

**Continues on page 2**

*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

T, D

03/08/2016

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title D  
Name SOKOLOWSKI, DOUGLAS J  
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

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