

2021 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H28744

Entity Name: ROOT GLASS CO., INC.

Current Principal Place of Business:

275 CLYDE MORRIS BLVD
ORMOND BEACH, FL 32174

Current Mailing Address:

275 CLYDE MORRIS BLVD
ORMOND BEACH, FL 32174 US

FEI Number: 59-2868816

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

RADIKOPF, GREGORY S
275 CLYDE MORRIS
ORMOND BEACH, FL 32174 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: GREGORY S. RADIKOPF

03/29/2021

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title D/S
Name MARONEY, PHILIP
Address 275 CLYDE MORRIS BLVD
City-State-Zip: ORMOND BEACH FL 32174

Title D/VP
Name VOGES, WILLIAM J
Address 275 CLYDE MORRIS BLVD
City-State-Zip: ORMOND BEACH FL 32174

Title P
Name ROOT, J. PRESTON
Address 275 CLYDE MORRIS BLVD
City-State-Zip: ORMOND BEACH FL 32174

Title DIRECTOR, TREASURER
Name RADIKOPF, GREGORY
Address 275 CLYDE MORRIS BLVD
City-State-Zip: ORMOND BEACH FL 32174

Title DIRECTOR
Name BARTHOLOMEW, DONNA M
Address 275 CLYDE MORRIS BLVD
City-State-Zip: ORMOND BEACH FL 32174

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: WILLIAM J. VOGES

VICE PRESIDENT

03/29/2021

Electronic Signature of Signing Officer/Director Detail

Date