

2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000020979

Entity Name: AREA GLASS, INC.**Current Principal Place of Business:**17650 ASHLEY DR.
PANAMA CITY BEACH, FL 32413**Current Mailing Address:**17650 ASHLEY DR.
PANAMA CITY BEACH, FL 32413 US**FEI Number: 43-2041287****Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**POYNOR, FREDDIE L
17650 ASHLEY DRIVE
PANAMA CITY BEACH, FL 32413 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	POYNOR, FREDDIE L
Address	17650 ASHLEY DR.
City-State-Zip:	PANAMA CITY BEACH FL 32413

Title	S, T
Name	POYNOR, DOROTHY R
Address	17650 ASHLEY DR.
City-State-Zip:	PANAMA CITY BEACH FL 32413

Title	VP
Name	POYNOR, BRIAN M
Address	17650 ASHLEY DR.
City-State-Zip:	PANAMA CITY BEACH FL 32413

Title	CFO
Name	RIESER, SARAH B
Address	17650 ASHLEY DR.
City-State-Zip:	PANAMA CITY BEACH FL 32413

Title	COO
Name	RIESER, MATTHEW
Address	17650 ASHLEY DR.
City-State-Zip:	PANAMA CITY BEACH FL 32413

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: SARAH GLASS RIESER**CFO****04/25/2019**_____
Electronic Signature of Signing Officer/Director Detail_____
Date