

2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000009447

Entity Name: YAPPY CORPORATION**Current Principal Place of Business:**1320 WHISPERING PINES DR
CLEARWATER, FL 33764**Current Mailing Address:**1320 WHISPERING PINES DR
CLEARWATER, FL 33764 US**FEI Number:** 20-4164636**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**SNODGRASS, GREGORY K
1320 WHISPERING PINES DR
CLEARWATER, FL 33764 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	PRESIDENT
Name	SNODGRASS, GREGORY K
Address	1320 WHISPERING PINES DR
City-State-Zip:	CLEARWATER FL 33764

Title	VP
Name	SNODGRASS, GREGORY K
Address	1320 WHISPERING PINES DR
City-State-Zip:	CLEARWATER FL 33764

Title	SECRETARY
Name	SNODGRASS, GREGORY K
Address	1320 WHISPERING PINES DR
City-State-Zip:	CLEARWATER FL 33764

Title	TREASURER
Name	SNODGRASS, GREGORY K
Address	1320 WHISPERING PINES DR
City-State-Zip:	CLEARWATER FL 33764

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: GREGORY SNODGRASS

PRESIDENT

04/23/2019

Electronic Signature of Signing Officer/Director Detail_____
Date