

**2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P06000149311

**Entity Name:** GLATTLI SPRAY SERVICE INC

**Current Principal Place of Business:**

9147 RODEO DR.  
LAKE WORTH, FL 33467

**Current Mailing Address:**

9147 RODEO DR.  
LAKE WORTH, FL 33467 US

**FEI Number:** 20-5984524

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

KELLY, ADAM T  
9147 RODEO DR.  
LAKE WORTH, FL 33467 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,D  
Name KELLY, ADAM  
Address 9147 RODEO DRIVE  
City-State-Zip: LAKE WORTH FL 33467

Title VP, D, TREASURER  
Name KELLY, GRETCHEN  
Address 9147 RODEO DRIVE  
City-State-Zip: LAKE WORTH FL 33467

Title SECRETARY  
Name GLATTLI, SANDRA B  
Address 10352 DENOEU ROAD  
City-State-Zip: BOYNTON BEACH FL 33472

Title VP OF OPERATIONS  
Name BARRY, SWETT  
Address 1926 POWELL ROAD  
City-State-Zip: WEST PALM BEACH FL 33411

Title VP OF ACCOUNTS  
Name CAIN, CHARLES TIM  
Address 7161 SE BUNKER HILL COURT  
City-State-Zip: HOBE SOUND FL 33455

*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:** GRETCHEN KELLY

VP, TREASURER

02/23/2024

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date