

**2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P16000072717

**Entity Name:** SGIS, INC.

**Current Principal Place of Business:**

4479 US HWY 27 S  
SEBRING, FL 33870

**Current Mailing Address:**

4479 US HWY 27 S  
SEBRING, FL 33870 US

**FEI Number:** 81-4006654

**Certificate of Status Desired:** No

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

PYLE, WILL  
952 MCGRATH LN  
AVON PARK, FL 33825 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                  | Title           | VP                   |
| Name            | PYLE, WILL         | Name            | STIVENDER, KYLE      |
| Address         | 952 MCGRATH LN     | Address         | 34 CHOCTAW ST        |
| City-State-Zip: | AVON PARK FL 33825 | City-State-Zip: | LAKE PLACID FL 33852 |

*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 M. PYLE, JR

**PRESIDENT**

**03/31/2020**

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

\_\_\_\_\_  
Date