

# **2014 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# 497985

**FILED**  
**Oct 01, 2014**  
**Secretary of State**

**Entity Name:** GLADES PRECOOLER, INC.

**Current Principal Place of Business:**

2900 STATE RD 15  
BELLE GLADE, FL 33430 US

**New Principal Place of Business:**

360 US HIGHWAY 27  
SOUTH BAY, FL 33493 US

**Current Mailing Address:**

P.O. BOX 598  
PAHOKEE, FL 33476

**New Mailing Address:**

P.O. BOX 882  
SOUTH BAY, FL 33493

**FEI Number:** 59-1670304

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SHIVER, DANIEL L  
807 IVY DRIVE  
WELLINGTON, FL 33414 US

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

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:** DANIEL L SHIVER

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

**Title:** VD  
**Name:** HATTON, ROGER  
**Address:** 2727 BACOM PT RD  
**City-St-Zip:** PAHOKEE, FL 00000,

**Title:** STD  
**Name:** SHIVER, DANIEL L  
**Address:** 807 IVY DRIVE  
**City-St-Zip:** WELLINGTON, FL 33414 US

**Title:** PD  
**Name:** BERGMANN, BRETT  
**Address:** 10363 TRIANON PLACE  
**City-St-Zip:** WELLINGTON, FL 33449 US

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:** DANIEL L SHIVER

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10/01/2014

Electronic Signature of Signing Officer or Director

Date