

**2025 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N04000006985

Entity Name: AMPLIFY, INC.

**Current Principal Place of Business:**

1142 MAPLETON ROAD  
JACKSONVILLE, FL 32207

**Current Mailing Address:**

1142 MAPLETON ROAD  
JACKSONVILLE, FL 32207 US

FEI Number: 20-1465640

Certificate of Status Desired: No

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

STAKE, IAN  
1142 MAPLETON ROAD  
JACKSONVILLE, FL 32207 US

**FILED**  
**Apr 28, 2025**  
**Secretary of State**  
**5108103671CC**

*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: IAN STAKE

04/28/2025

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title SECRETARY  
Name RIDER, CECILE  
Address 1121 MORVENWOOD RD.  
City-State-Zip: JACKSONVILLE FL 32207

Title CEO  
Name STAKE, IAN  
Address 1142 MAPLETON RD.  
City-State-Zip: JACKSONVILLE FL 32207

Title CHAIRMAN  
Name JOEL, BOB  
Address CO-FOUNDER & CIO SALVUS WEALTH MANAGEMENT, LLC  
1988 CAMELLIA OAKS LANE  
City-State-Zip: JACKSONVILLE FL 32217

Title VC  
Name PATANIA, THOMAS  
Address 1630 WESTMINISTER AVENUE  
City-State-Zip: JACKSONVILLE FL 32210

Title TREASURER  
Name GERVIN, SYDNEY A III  
Address SOUTHCOAST CAPITAL ONE INDEPENDENT DRIVE SUITE 1600  
City-State-Zip: JACKSONVILLE FL 32202

Title DIRECTOR  
Name GULLIFORD, WILLIAM I III  
Address MANAGING DIRECTOR, CBRE 225 WATER ST. SUITE 110  
City-State-Zip: JACKSONVILLE FL 32202

Title DIRECTOR  
Name KINCHEN, CHRISTINE  
Address 2756 RANDY ROAD  
City-State-Zip: JACKSONVILLE FL 32216

Title DIRECTOR  
Name SURFACE, DAVID K  
Address VP BUS DEV VESTA PROPERTY SERVICES 1021 OAK STREET  
City-State-Zip: JACKSONVILLE FL 32204

**Continues on page 2**

*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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

SIGNATURE: IAN STAKE

CEO

04/28/2025

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title           DIRECTOR  
Name           YORK, RUDY  
Address        RUDY YORK DESIGNS, INC.  
                  3562 ST. JOHNS AVENUE  
City-State-Zip: JACKSONVILLE FL 32205