

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N08000000708

**Entity Name:** GLEAM, INC.

**Current Principal Place of Business:**

600 S FLORIDA AVE  
DELAND, FL 32720

**Current Mailing Address:**

600 S FLORIDA AVE  
DELAND, FL 32720

**FEI Number:** 42-1745363

**Certificate of Status Desired:** No

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

BAUER, KIRK ESQ  
223 S WOODLAND BLVD  
DELAND, FL 32720 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 D  
Name MAYHEW, GREGG  
Address 2245 DUMAS DRIVE  
City-State-Zip: DELTONA FL 32738

Title D, VP  
Name MCPHERSON, RON  
Address 415 KINGSROW LANE  
City-State-Zip: DEBARY FL 32713

Title D, S  
Name BOWER, MARY E  
Address 226 BARDEN DR  
City-State-Zip: DELAND FL 32720

Title D, T  
Name CLARK, JOANN  
Address 317 SPRING LAKE DR  
City-State-Zip: DELAND FL 32724

Title D, P  
Name ANDERSON, DON E  
Address 202 W WINNEMISSETT AVE  
City-State-Zip: DELAND FL 32720

Title D  
Name WESTLUND, JESSICA  
Address 600 S. FLORIDA AVENUE  
City-State-Zip: DELAND FL 32720

Title D  
Name PHILLIPS, WENDELL  
Address 600 S FLORIDA AVE  
City-State-Zip: DELAND FL 32720

*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:** DON E. ANDERSON

**PRESIDENT**

**04/07/2015**

Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_ Date