

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N12000000058

FILED
Feb 07, 2017
Secretary of State
CC0789132169

Entity Name: AMBER'S ANTIBODIES, INC.

Current Principal Place of Business:

6191 SPANISH OAKS LANE
NAPLES, FL 34119

Current Mailing Address:

6191 SPANISH OAKS LANE
NAPLES, FL 34119 US

FEI Number: 45-4170094

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GRIDER, CRAIG D
6191 SPANISH OAKS LANE
NAPLES, FL 34119 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 DIRECTOR, PRESIDENT
Name GRIDER, CRAIG D
Address 6191 SPANISH OAKS LANE
City-State-Zip: NAPLES FL 34119

Title DIRECTOR, VP, TREASURER
Name GRIDER, AMBER C
Address 6191 SPANISH OAKS LANE
City-State-Zip: NAPLES FL 34119

Title DIRECTOR, SECRETARY
Name SMITH, KAROL M
Address 9120 THE LANE
City-State-Zip: NAPLES FL 34109

Title DIRECTOR
Name LANGLOIS, MATTHEW
Address 27289 HIGH SEAS LANE
City-State-Zip: BONITA SPRINGS FL 34135

Title DIRECTOR
Name KIEFFER, BRYAN
Address 8347 LAUREL LAKES BLVD.
City-State-Zip: NAPLES FL 34119

Title DIRECTOR
Name BLACK, DANIELLE
Address 14695 INDIGO LAKES CIRCLE
City-State-Zip: NAPLES FL 34119

Title DIRECTOR
Name LANGLOIS, TEDDI
Address 27289 HIGH SEAS LANE
City-State-Zip: BONITA SPRINGS FL 34135

Title DIRECTOR
Name SMITH, RANDY
Address 9120 THE LANE
City-State-Zip: NAPLES FL 34109

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: CRAIG D GRIDER

PRESIDENT

02/07/2017

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name KIEFFER, MELISSA
Address 8347 LAUREL LAKES BLVD.
City-State-Zip: NAPLES FL 34119

Title DIRECTOR
Name BLACK, BRAD
Address 14695 INDIGO LAKES CIRCLE
City-State-Zip: NAPLES FL 34119