

2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 299690

Entity Name: COUNTRYSIDE GLASS & MIRROR, INC.**Current Principal Place of Business:**2650 GANDY BLVD N
ST PETERSBURG, FL 33702**Current Mailing Address:**2650 GANDY BLVD N
SAINT PETERSBURG, FL 33702 US**FEI Number:** 59-1110745**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**MINER, RICHARD
4549 GRAND LAKESIDE DR
PALM HARBOR, FL 34684 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
Name	MINER, RICHARD
Address	4549 GRAND LAKESIDE DR
City-State-Zip:	PALM HARBOR FL 34684

Title	ST
Name	MINER, ELIZABETH
Address	4549 GRAND LAKESIDE DR
City-State-Zip:	PALM HARBOR FL 34684

Title	ASST. TREASURER
Name	MINER, KEVIN
Address	774 ST. ANNE DRIVE
City-State-Zip:	DUNEDIN FL 34698

Title	VP
Name	MINER, KENNETH
Address	1702 HICKORY GATE DR
City-State-Zip:	DUNEDIN FL

Title	ST
Name	MINER, MEGHAN
Address	1702 HICKORY GATE DR
City-State-Zip:	DUNEDIN FL 34698

Title	TREASURER
Name	KIRKPATRICK, LEE
Address	1829 WILLOW OAK DR
City-State-Zip:	PALM HARBOR FL 34683

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: KATHY HANNAS**OFFICE MANAGER****07/08/2016**_____
Electronic Signature of Signing Officer/Director Detail_____
Date