# 2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G12407

Entity Name: AMERICAN R CO.

# **Current Principal Place of Business:**

3301 W SANTIAGO STREET TAMPA, FL 33629

# **Current Mailing Address:**

3301 W SANTIAGO STREET TAMPA, FL 33629 US

# FEI Number: 59-2236400

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

WIEMER, IRVIN J 3301 W SANTIAGO ST TAMPA, FL 33629 US

# Secretary of State CC1120298245

Date

Certificate of Status Desired: No

FILED Apr 11, 2017

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

# Officer/Director Detail :

	Title	DIRECTOR, PRESIDENT	Title	DIRECTOR, VP, SECRETARY
	Name	WIEMER, IRVIN J	Name	WANSLEY, MICHAEL
	Address	3301 W SANTIAGO STREET	Address	3874 48TH AVENUE, S
	City-State-Zip:	TAMPA FL 33629	City-State-Zip:	ST PETERSBURG FL 33711
	Title	DIRECTOR, VP, TREASURER	Title	DIRECTOR, VP, ASST. TREASURER
	Name	LARGER, JOHN	Name	BARKER, RANDY
	Address	5136 E CR 478	Address	17803 SIMMONS ROAD
	City-State-Zip:	WEBSTER FL 33597	City-State-Zip:	LUTZ FL 33548
	Title	DIRECTOR, VP, ASST. SECRETARY	Title Name	DIRECTOR, VP HATSELL. MIKE
	Title Name Address	DIRECTOR, VP, ASST. SECRETARY GREEN, BILL 11644 NELLIE OAKS BEND	Title Name Address	DIRECTOR, VP HATSELL, MIKE 416 BAY POINT WAY, N
	Name	GREEN, BILL	Name	HATSELL, MIKE 416 BAY POINT WAY, N
	Name Address	GREEN, BILL 11644 NELLIE OAKS BEND	Name Address	HATSELL, MIKE 416 BAY POINT WAY, N
	Name Address City-State-Zip:	GREEN, BILL 11644 NELLIE OAKS BEND CLERMONT FL 34711	Name Address City-State-Zip:	HATSELL, MIKE 416 BAY POINT WAY, N ST JOHNS FL 32259
	Name Address City-State-Zip: Title	GREEN, BILL 11644 NELLIE OAKS BEND CLERMONT FL 34711 DIRECTOR, VP	Name Address City-State-Zip: Title	HATSELL, MIKE 416 BAY POINT WAY, N ST JOHNS FL 32259 DIRECTOR, VP
	Name Address City-State-Zip: Title Name	GREEN, BILL 11644 NELLIE OAKS BEND CLERMONT FL 34711 DIRECTOR, VP MILLER, THOMAS	Name Address City-State-Zip: Title Name	HATSELL, MIKE 416 BAY POINT WAY, N ST JOHNS FL 32259 DIRECTOR, VP BARKER, BRENT

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: IRVIN J WIEMER

PRESIDENT

04/11/2017

Electronic Signature of Signing Officer/Director Detail

Date