2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G94946

Entity Name: AMBER GLADES, INC.

Current Principal Place of Business:

3113 STATE ROAD 580 SAFETY HARBOR, FL 34695

Current Mailing Address:

3113 STATE ROAD 580 LOT #216 SAFETY HARBOR, FL 34695 US

FEI Number: 59-2497828

Name and Address of Current Registered Agent:

KUHN, CHRISTOPHER 1844 SOLON AVE DUNEDIN, FL 34698 US

FILED Jan 16, 2020 Secretary of State 4474672725CC

Certificate of Status Desired: No

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 .

Officer/Director Detail :			
Title	VP, DIRECTOR	Title	DIRECTOR
Name	RICHARDS, LORRAINE	Name	FAIOLA, MARY LYNN
Address	3113 STATE ROAD 580 LOT #157	Address	3113 ST RD 580 LOT #13
City-State-Zip:	SAFETY HARBOR FL 34695	City-State-Zip:	SAFETY HARBOR FL 34695
Title	DIRECTOR, SECRETARY	Title	DIRECTOR
Name	CHISM, BEVERLY	Name	PAUL, FETHER
Address	3113 ST RD 580 LOT #231	Address	3113 STATE ROAD 580 LOT #34
City-State-Zip:	SAFETY HARBOR FL 34695	City-State-Zip:	SAFETY HARBOR FL 34695
Title	TREASURER, DIRECTOR	Title	DIRECTOR
Name	PETERMAN, PATTY	Name	SUDERMAN, DAVID
Address	3113 STATE RD 580 LOT 216	Address	3113 ST RD 580 LOT 353
City-State-Zip:	SAFETY HARBOR FL 34695	City-State-Zip:	SAFETY HARBOR FL 34695
Title	DIRECTOR, PRESIDENT		
Name	DAVIS, WAYNE		
Address	3113 STATE ROAD 580 LOT 211		

City-State-Zip: SAFETY HARBOR FL 34695

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: PATTY J PETERMAN

DIRECTOR TREASURER 01/16/2020

Electronic Signature of Signing Officer/Director Detail

Date

Date