

2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H17665

Entity Name: PENINSULA PRODUCTS, INC.**Current Principal Place of Business:**535 CENTRAL AVE
SUITE 303
SAINT PETERSBURG, FL 33701**Current Mailing Address:**PO BOX 26
SAINT PETERSBURG, FL 33731 US**FEI Number:** 59-2443740**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**MEADOWCROFT, DARBY J
535 CENTRAL AVE
SUITE 303
SAINT PETERSBURG, FL 33701 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:** DARBY J MEADOWCROFT**02/27/2024**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DIRECTOR, CHAIRMAN, ASST.
TREASURER, VP
Name MEADOWCROFT, CHARLES D
Address 535 CENTRAL AVE
SUITE 303
City-State-Zip: SAINT PETERSBURG FL 33701

Title DIRECTOR, TREASURER, VP
Name MEADOWCROFT, DARBY J
Address 535 CENTRAL AVE
SUITE 303
City-State-Zip: SAINT PETERSBURG FL 33701

Title DIRECTOR, SECRETARY, VP
Name MEADOWCROFT, CAROLYN L
Address 535 CENTRAL AVE
SUITE 303
City-State-Zip: SAINT PETERSBURG FL 33701

Title DIRECTOR, ASST. SECRETARY,
PRESIDENT
Name MEADOWCROFT, CHARLES A
Address 535 CENTRAL AVE
SUITE 303
City-State-Zip: SAINT PETERSBURG FL 33701

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: DARBY J MEADOWCROFT**TREASURER****02/27/2024**

Electronic Signature of Signing Officer/Director Detail

Date