

**2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# H92205

**Entity Name:** HI-TIDE SALES, INC.

**Current Principal Place of Business:**

% CRAIG A WOOD  
4050 SELVITZ RD.  
FT. PIERCE, FL 34981

**Current Mailing Address:**

% CRAIG A WOOD  
4050 SELVITZ RD.  
FT. PIERCE, FL 34981

**FEI Number:** 65-0095393

**Certificate of Status Desired:** No

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

GOOGE, HOWARD E  
401 E OSCELOA ST  
STUART, FL 34994 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 WOOD, A CRAIG  
Address 4050 SELVITZ RD  
City-State-Zip: FT. PIERCE FL 34981

Title T  
Name ROONEY, MARGARITA  
Address 314 SW TORREYA TRACE  
City-State-Zip: PORT ST LUCIE FL 34986

Title VPS  
Name WOOD, KARA  
Address 4050 SELVITZ RD  
City-State-Zip: FT PIERCE FL 34981

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:** MARGARITA ROONEY

**TREASURER**

**02/01/2013**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date