

**2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# L20440

**Entity Name:** CASOLA STAINED GLASS STUDIO, INC.

**Current Principal Place of Business:**

C/O LAWRENCE CASOLA  
11000 METRO PKWY., STE. 11  
FT. MYERS, FL 33966

**Current Mailing Address:**

C/O LAWRENCE CASOLA  
11000 METRO PKWY., STE. 11  
FT. MYERS, FL 33966

**FEI Number:** 65-0151907

**Certificate of Status Desired:** No

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

CASOLA, KENNETH J  
11000 METRO PARKWAY  
SUITE 11  
FT. MYERS, FL 33966 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 DST  
Name CASOLA, ELAINE  
Address 11000 METRO PKWY. #11  
City-State-Zip: FT. MYERS FL  
  
Title VP  
Name CASOLA, LAWRENCE A  
Address C/O LAWRENCE CASOLA  
11000 METRO PKWY., STE. 11  
City-State-Zip: FT. MYERS FL 33966

Title DP  
Name CASOLA, KENNETH  
Address 11000 METRO PKWY #1  
City-State-Zip: FT. MYERS FL

*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:** JAYNE R CASOLA

**SECRETARY**

**01/16/2020**

Electronic Signature of Signing Officer/Director Detail

Date