

**2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P01000114575

**Entity Name:** VOLOGY, INC.

**Current Principal Place of Business:**

15950 BAY VISTA DR.  
CLEARWATER, FL 33760

**Current Mailing Address:**

15950 BAY VISTA DR.  
CLEARWATER, FL 33760 US

**FEI Number: 59-3760415**

**Certificate of Status Desired: Yes**

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

HARRIS, DANIEL A. ESQ.  
13644 W. HILLSBOROUGH AVE  
TAMPA, FL 33635 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 DIRECTOR, CEO  
Name SHEVLIN, BARRY  
Address 15950 BAY VISTA DR.  
City-State-Zip: CLEARWATER FL 33760

Title SECRETARY, CFO  
Name NEWMYER, GRANT  
Address 15950 BAY VISTA DR.  
City-State-Zip: CLEARWATER FL 33760

Title DIRECTOR  
Name DAVIDSON, JAMES  
Address 15950 BAY VISTA DR.  
City-State-Zip: CLEARWATER FL 33760

Title DIRECTOR  
Name GRIES, ROBERT  
Address 15950 BAY VISTA DR.  
City-State-Zip: CLEARWATER FL 33760

Title DIRECTOR  
Name LANDERS, PATRICK  
Address 15950 BAY VISTA DR.  
City-State-Zip: CLEARWATER FL 33760

Title DIRECTOR  
Name LOPARCO, MICHAEL  
Address 15950 BAY VISTA DR.  
City-State-Zip: CLEARWATER FL 33760

Title DIRECTOR  
Name MACDONALD, STEVEN  
Address 15950 BAY VISTA DR.  
City-State-Zip: CLEARWATER FL 33760

Title DIRECTOR  
Name STAFFORD, JOHN  
Address 15950 BAY VISTA DR.  
City-State-Zip: CLEARWATER FL 33760

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*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: BARRY SHEVLIN**

**CEO**

**02/11/2019**

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

\_\_\_\_\_  
Date

**Officer/Director Detail Continued :**

Title           DIRECTOR  
Name           WEISS, DAVID  
Address        15950 BAY VISTA DR.  
City-State-Zip: CLEARWATER FL 33760

Title           PRESIDENT  
Name           WIRTA, DAVID  
Address        15950 BAY VISTA DR.  
City-State-Zip: CLEARWATER FL 33760