

2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000035939

Entity Name: FLORIDA BY PRODUCTS, INC.**Current Principal Place of Business:**465 CABOOSE PL
MULBERRY, FL 33860**Current Mailing Address:**465 CABOOSE PL
MULBERRY, FL 33860 US**FEI Number:** 20-2512043**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**AIRTH, ADAM ESQ.
500 S. FLORIDA AVENUE
SUITE 300
LAKELAND, FL 33801 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	D
Name	ZEHE, ROGER H.
Address	465 CABOOSE PLACE
City-State-Zip:	MULBERRY FL 33860

Title	P
Name	FORD, JAMES JJR
Address	465 CABOOSE PL
City-State-Zip:	MULBERRY FL 33860

Title	VP
Name	STRADTMAN, RICHARD C
Address	465 CABOOSE PLACE
City-State-Zip:	MULBERRY FL 33860

Title	D
Name	MURRAY, HOWARD P
Address	465 CABOOSE PLACE
City-State-Zip:	MULBERRY FL 33860

Title	D
Name	MURRAY, JAMES C
Address	1600 AMANTHUS CT
City-State-Zip:	DELAND FL 32724

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: RICHARD C. STRADTMAN

VP OPERATIONS

03/07/2017

Electronic Signature of Signing Officer/Director Detail_____
Date