## 2025 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P09000080228

Entity Name: STAMBAUGH, INC.

**Current Principal Place of Business:** 

500 ORCHID SPRINGS DRIVE WINTER HAVEN. FL 33884

**Current Mailing Address:** 

500 ORCHID SPRINGS DRIVE WINTER HAVEN. FL 33884 US

FEI Number: 65-1155659 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

STAMBAUGH, TAUN 500 ORCHID SPRINGS DRIVE WINTER HAVEN, FL 33884 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: TAUN STAMBAUGH 04/22/2025

Electronic Signature of Registered Agent

Date

Officer/Director Detail:

Title PRESIDENT, TREASURER Title **SECRETARY** 

STAMBAUGH, TAUN Name Name STAMBAUGH, DELAINA

500 ORCHID SPRINGS DRIVE Address 500 ORCHID SPRINGS DRIVE Address

City-State-Zip: WINTER HAVEN FL 33884 WINTER HAVEN FL 33884 City-State-Zip:

Title DIRECTOR Title DIRECTOR

Name VARGAS, ULISES SCHROEDER, KARL Name

Address 500 ORCHID SPRINGS DRIVE Address 500 ORCHID SPRINGS DRIVE WINTER HAVEN FL 33884 City-State-Zip: City-State-Zip: WINTER HAVEN FL 33884

Title **DIRECTOR** 

Name STAMBAUGH, CARLY

500 ORCHID SPRINGS DRIVE Address City-State-Zip: WINTER HAVEN FL 33884

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.

04/22/2025 SIGNATURE: KARL SCHROEDER DIRECTOR

**FILED** Apr 22, 2025

**Secretary of State** 

0710730693CC