

2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P11000108522

Entity Name: ALLGOOD TAX SERVICES, INC.**Current Principal Place of Business:**34931 US HIGHWAY 19 N
SUITE 203
PALM HARBOR, FL 34684**Current Mailing Address:**34931 US HIGHWAY 19 N
SUITE 203
PALM HARBOR, FL 34684 US**FEI Number:** 36-4721444**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**ALLGOOD, KENNETH E
7304 HIDEAWAY TRAIL
NEW PORT RICHEY, FL 34655 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	S
Name	PERRY, CAROLYN
Address	16209 BREAKWATER LN
City-State-Zip:	SPRING HILL FL 34610

Title	VP
Name	EPPERSON, DEBORAH VP
Address	45 PLEASANT AVE
City-State-Zip:	BRICK NJ 08721

Title	P, T
Name	ALLGOOD, KENNETH E
Address	7304 HIDEAWAY TR
City-State-Zip:	NEW PORT RICHEY FL 34655

Title	ASST VP
Name	DONO, ELIZABETH A AVP
Address	7304 HIDEAWAY TRAIL
City-State-Zip:	NEW PORT RICHEY FL 34655

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: KENNETH E. ALLGOOD**PRESIDENT****03/30/2020**_____
Electronic Signature of Signing Officer/Director Detail_____
Date