2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P16000014191

Entity Name: AMERICAS OFFICE SOURCE, INC

Current Principal Place of Business:

706 TURNBULL AVENUE, SUITE 305 ALTAMONTE SPRINGS, FL 32701

Current Mailing Address:

706 TURNBULL AVENUE, SUITE 305 ALTAMONTE SPRINGS . FL 32701 US

FEI Number: 81-1444145 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM C/O C T CORPORATION SYSTEM PLANTATION, FL 33324 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

FILED Jun 19, 2020

Secretary of State

5835263105CC

Date

Officer/Director Detail:

Title DIRECTOR, SECRETARY & VICE Title VP

PRESIDENT

Name BLEISCH, N. DAVID

Address 706 TURNBULL AVENUE, SUITE 305

Address 706 TURNBULL AVENUE, SUITE 305

City-State-Zip: ALTAMONTE SPRINGS FL 32701

City-State-Zip: ALTAMONTE SPRINGS FL 32701

Title VP TREASURER/VICE PRESIDENT

Name LELAND, RICHARD
Name HAAS, RICHARD A. JR

Address 706 TURNBULL AVENUE, SUITE 305

Address 706 TURNBULL AVENUE, SUITE 305

City-State-Zip: ALTAMONTE SPRINGS FL 32701

Title VP

Electronic Signature of Signing Officer/Director Detail

Title PRESIDENT Name RYCKMAN, JEREMY

Name MOHAN, STEPHEN M Address 706 TURNBULL AVENUE, SUITE 305
Address 706 TURNBULL AVENUE, SUITE 305
City-State-Zip: ALTAMONTE SPRINGS FL 32701

City-State-Zip: ALTAMONTE SPRINGS FL 32701

Title VP Name WALLE JOSEPH C

Name WHITE, JOSEPH G.
Name WIGHT, BRYAN

Address 706 TURNBULL AVENUE, SUITE 305

Address 706 TURNBULL AVENUE, SUITE 305

City-State-Zip: ALTAMONTE SPRINGS FL 32701

City-State-Zip: ALTAMONTE SPRINGS FL 32701

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: JOSEPH G. WHITE ASSISTANT SECRETARY 06/19/2020