

**2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P19000062280

**Entity Name:** STORMS CARPET CARE, INC.

**Current Principal Place of Business:**

118 LOS ARBOR  
DELAND, FL 32724

**Current Mailing Address:**

118 LOS ARBOR  
DELAND, FL 32724 US

**FEI Number: 84-2453214**

**Certificate of Status Desired: No**

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

INDEGLIA, VINCENT A  
5200 TAMiami TRAIL NORTH  
SUITE 101  
NAPLES, FL 34103 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 P  
Name STORM, DAVID  
Address PO BOX 2503  
City-State-Zip: DELAND FL 32721

Title VP  
Name STORM, STANLEY  
Address PO BOX 2503  
City-State-Zip: DELAND FL 32721

Title TRES  
Name STORM, DAVID  
Address PO BOX 2503  
City-State-Zip: DELAND FL 32721

Title SEC  
Name STORM, STANLEY  
Address PO BOX 2503  
City-State-Zip: DELAND FL 32721

*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: DAVID STORM**

**PRESIDENT**

**04/13/2023**

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

\_\_\_\_\_  
Date