

**2021 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P95000057019

**Entity Name:** SUB-ZERO GROUP SOUTHEAST, INC.**Current Principal Place of Business:**5950 HAZELTINE NATIONAL DRIVE  
STE. #670  
ORLANDO, FL 32822**Current Mailing Address:**5950 HAZELTINE NATIONAL DRIVE  
STE. #670  
ORLANDO, FL 32822 US**FEI Number:** 39-1826999**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**F&L CORP.  
ONE INDEPENDENT DRIVE  
SUITE 1300  
JACKSONVILLE, FL 32202 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 CEO, DIRECTOR  
Name BAKKE, JAMES J  
Address 4717 HAMMERSLEY RD.  
City-State-Zip: MADISON WI 53711

Title TREASURER, VP  
Name FOX, ANTHONY S  
Address 4717 HAMMERSLEY RD.  
City-State-Zip: MADISON WI 53711

Title SECRETARY, GENERAL COUNSEL,  
DIRECTOR  
Name RENFERT, BLAINE R  
Address 4717 HAMMERSLEY RD.  
City-State-Zip: MADISON WI 53711

Title PRESIDENT, DIRECTOR  
Name BERGQUIST, JOHN  
Address 5950 HAZELTINE NATIONAL DRIVE  
SUITE 670  
City-State-Zip: ORLANDO FL 32822

Title DIRECTOR  
Name SCHWARTZ, DEBORAH A  
Address 4717 HAMMERSLEY RD.  
City-State-Zip: MADISON WI 53711

Title VP  
Name MAXAM, ROB  
Address 3280 PEACHTREE ROAD, NE  
STE. #200  
City-State-Zip: ATLANTA GA 30305

Title VP  
Name HUFFMAN, WILL  
Address 127 W. WORTHINGTON AVE.  
STE. #180  
City-State-Zip: CHARLOTTE NC 28203

Title VP  
Name SCHWARTZ, FREDERICK P.  
Address 4717 HAMMERSLEY RD  
City-State-Zip: MADISON WI 53711

**Continues on page 2**

*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: BLAINE R RENFERT****SECRETARY****03/30/2021**

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

|                 |                             |
|-----------------|-----------------------------|
| Title           | VP                          |
| Name            | DELONG, DON                 |
| Address         | 3280 PEACHTREE ROAD NE #200 |
| City-State-Zip: | ATLANTA GA 30305            |