

**2023 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F06000007561

**Entity Name:** PRIDE INDUSTRIES, INC.

**Current Principal Place of Business:**

10030 FOOTHILLS BLVD  
RISK MANAGEMENT - MS29  
ROSEVILLE, CA 95747

**Current Mailing Address:**

PO BOX 1200  
RISK MANAGMENT - MS29  
ROCKLIN, CA 95677-7200 US

**FEI Number:** 94-1650529

**Certificate of Status Desired:** No

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

CORPORATE CREATIONS NETWORK, INC.  
801 US HIGHWAY 1  
NORTH PALM BEACH, FL 33408 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, PRESIDENT  
Name DERN, JEFF  
Address 10030 FOOTHILLS BLVD  
RISK MANAGEMENT - MS29  
City-State-Zip: ROSEVILLE CA 95747

Title S  
Name OLIVEIRA, TINA  
Address 10030 FOOTHILLS BLVD  
City-State-Zip: ROSEVILLE CA 95747

Title COO  
Name BLAKE , CASEY  
Address 10030 FOOTHILLS BLVD.  
City-State-Zip: ROSEVILLE CA 95747

Title DIRECTOR, CHAIRMAN  
Name OLSEN, ROBERT  
Address 10030 FOOTHILLS BLVD  
RISK MANAGEMENT - MS29  
City-State-Zip: ROSEVILLE CA 95747

Title CFO  
Name SHARP , CHARLES  
Address 10030 FOOTHILLS BLVD  
RISK MANAGEMENT - MS29  
City-State-Zip: ROSEVILLE CA 95747

*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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** TINA OLIVEIRA

**SECRETARY, BY JULIE PHILLIPS, ATTORNEY-IN-FACT** 03/24/2023

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

\_\_\_\_\_  
Date

