### 2019 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F18000002802

Entity Name: STAMBAUGH NESS, INC.

**Current Principal Place of Business:** 

2600 EASTERN BLVD YORK, PA 17402

# **Current Mailing Address:**

2600 EASTERN BLVD YORK, PA 17402 US

FEI Number: 23-2846715 Certificate of Status Desired: No

### Name and Address of Current Registered Agent:

REGISTERED AGENTS INC 7901 4TH STREET NORTH SUITE 300 ST.PETERSBURG, FL 33702 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** Apr 05, 2019

**Secretary of State** 

8953478849CC

#### Officer/Director Detail:

Title	CHAIRMAN/PRESIDENT	Title	VICE CHAIRMAN/VP
Name	HAKE, STEVEN	Name	WELKER, DAREN
Address	2600 EASTERN BLVD	Address	2600 EASTERN BLVD
City-State-Zip:	YORK PA 17402	City-State-Zip:	YORK PA 17402

DIRECTOR/SECRETARY Title DIRECTOR Title

HOFFMAN, NIKKI Name Name BREAM, LARRY Address 2600 EASTERN BLVD Address 2600 EASTERN BLVD YORK PA 17402 City-State-Zip: City-State-Zip: YORK PA 17402

Title DIRECTOR Title **TREASURER** 

HURSH, M SCOTT Name Name MOUL, THOMAS 2600 EASTERN BLVD Address Address 2600 EASTERN BLVD

City-State-Zip: YORK PA 17402 City-State-Zip: YORK PA 17402

Title DIRECTOR Title **DIRECTOR** 

Name LIGHTY, STEPHEN Name KLIMCHOCK, TIMOTHY Address 2600 EASTERN BLVD Address 2600 EASTERN BLVD City-State-Zip: YORK PA 17402

City-State-Zip: YORK PA 17402

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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: THOMAS MOUL

04/05/2019

## Officer/Director Detail Continued:

Title DIRECTOR

Name MOUL, THOMAS

Address 2600 EASTERN BLVD

City-State-Zip: YORK PA 17402

Title DIRECTOR

Name SNYDER, STEPHEN Address 2600 EASTERN BLVD

City-State-Zip: YORK PA 17402

Title DIRECTOR

Name HOGENTOGLER, RICHARD

Address 2600 EASTERN BLVD

City-State-Zip: YORK PA 17402

Title DIRECTOR

Name NELSON, JENNIFER

Address 2600 EASTERN BLVD

City-State-Zip: YORK PA 17402

Title DIRECTOR

Name SPINELLO, GLENN

Address 2600 EASTERN BLVD

City-State-Zip: YORK PA 17402