

2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P13000070357

Entity Name: AVENTINE DEVELOPMENT SERVICES CORPORATION**Current Principal Place of Business:**190 E. STACY RD.,
SUITE 306-167
ALLEN, TX 91326**Current Mailing Address:**190 E. STACY RD.,
SUITE 306-167
ALLEN, TX 91326 US**FEI Number:** 46-3505360**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**RUFFIER, JOHN D
215 N. EOLA DRIVE
ORLANDO, FL 32801 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:** JOHN D RUFFIER

05/10/2023

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name HAGLE, CHAD A
Address 190 E. STACY RD.,
 SUITE 306-167
City-State-Zip: ALLEN TX 91326

Title CEO
Name HAGLE, CHAD A
Address 190 E. STACY RD.,
 SUITE 306-167
City-State-Zip: ALLEN TX 91326

Title COO
Name HAGLE, CHAD
Address 190 E. STACY RD.,
 SUITE 306-167
City-State-Zip: ALLEN TX 91326

Title DIRECTOR
Name HAGLE, CHAD
Address 190 E. STACY RD.,
 SUITE 306-167
City-State-Zip: ALLEN TX 91326

Title SECRETARY
Name RUFFIER, JOHN D
Address 215 N. EOLA DRIVE
City-State-Zip: ORLANDO FL 32801

Title TREASURER
Name HAGLE, CHAD
Address 190 E. STACY RD.,
 SUITE 306-167
City-State-Zip: ALLEN TX 91326

Title CHAIRMAN
Name HAGLE, CHAD
Address 190 E. STACY RD.,
 SUITE 306-167
City-State-Zip: ALLEN TX 91326

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: CHAD HAGLE

PRESIDENT

05/10/2023

Electronic Signature of Signing Officer/Director Detail

Date