

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00486

FILED  
Jan 07, 2012  
Secretary of State

**Entity Name:** MICHELS CORPORATION

**Current Principal Place of Business:**

817 W. MAIN ST.  
BROWNSVILLE, WI 530060128 US

**New Principal Place of Business:**

**Current Mailing Address:**

817 W. MAIN ST.  
P. O. BOX 128  
BROWNSVILLE, WI 530060128 US

**New Mailing Address:**

**FEI Number:** 39-0970311      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

PARKER, JOHNSON, OWEN, MCGUIRE  
SCOTT MURPHY  
108 E. HILLCREST  
ORLANDO, FL 32802 US

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

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

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: MICHELS, PATRICK D  
Address: 817 W. MAIN ST.  
City-St-Zip: BROWNSVILLE, WI 530060128 US

Title: T  
Name: MICHELS, PATRICK D  
Address: 817 W. MAIN ST.  
City-St-Zip: BROWNSVILLE, WI 530060128 US

Title: S  
Name: JOHNSON, BRIAN P  
Address: N7430 NIAGARA LANE  
City-St-Zip: FOND DU LAC, WI 549358858 US

Title: CEOD  
Name: MICHELS, RUTH L  
Address: 817 W MAIN ST  
City-St-Zip: BROWNSVILLE, WI 530060128 US

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: BRIAN P. JOHNSON

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01/07/2012

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date