

**2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# V04646

**Entity Name:** MIKE FARRIS INC.

**Current Principal Place of Business:**

1504 DELAWARE AVE.  
LYNN HAVEN, FL 32444

**Current Mailing Address:**

1504 DELAWARE AVE.  
LYNN HAVEN, FL 32444

**FEI Number:** 59-3103145

**Certificate of Status Desired:** No

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

FARRIS, MIKE  
1504 DELAWARE AVE.  
LYNN HAVEN, FL 32444 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            PRESIDENT  
Name            FARRIS, MIKE  
Address        1504 DELAWARE AVE.  
City-State-Zip: LYNN HAVEN FL

Title            1VP  
Name            FARRIS, JOYCE  
Address        1504 DELAWARE AVE.  
City-State-Zip: LYNN HAVEN FL 32444

*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:** MIKE FARRIS

**PRESIDENT**

**03/04/2017**

Electronic Signature of Signing Officer/Director Detail

Date