

ANNUAL REPORT

DOCUMENT # 597103

1. Entity Name
NICK'S WOOD NACKS, INC.

FILED
Jan 12, 2004 08:00 AM
Secretary of State

Principal Place of Business
HIGHWAY 390 AND W 15TH ST
LYNN HAVEN, FL 32444Mailing Address
607 WEST HWY 390
LYNN HAVEN, FL 32444

01082004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE4. FEI Number
59-1868890Applied For
Not Applicable5. Certificate of Status Desired ☐**\$8.75** Additional
Fee Required

6. Name and Address of Current Registered Agent

NICHOLS, JOHN
HIGHWAY 390 AND 15TH ST
LYNN HAVEN, FL 32444**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.009. Election Campaign Financing
Trust Fund Contribution. ☐**\$5.00** May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	DP
NAME	NICHOLS, JOHN
STREET ADDRESS	1516 GRANT AVE
CITY - ST - ZIP	PANAMA CITY, FL 32401

TITLE	STD
NAME	NICHOLS, MARY
STREET ADDRESS	1516 GRANT AVE
CITY - ST - ZIP	PANAMA CITY, FL 32401

TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

U00000002017
 01/12/04-80035-012 150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: