

2005 FOR PROFIT CORPORATION
ANNUAL REPORT

FILED
Aug 17, 2005 08:00 AM
Secretary of State

DOCUMENT # 649887

1. Entity Name
NUSSMEYER ADVERTISING, INC.



Principal Place of Business
10151 DEERWOOD PARK BLVD STE 250
JACKSONVILLE, FL 32256 US

Mailing Address
10151 DEERWOOD PARK BLVD STE 250
JACKSONVILLE, FL 32256 US

% 2 0 5 4 4 3 6 6 6 6 6 F &

05022005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-1963439

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

QUINCEY, JAMES S
226 SOUTH MAIN STREET
GAINESVILLE, FL 32601

**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 \$550.00
Due by September 7, 2005

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE S
NAME NUSSMEYER, CHARLTON
STREET ADDRESS 1401 WOOD HILL PLACE
CITY-ST-ZIP JACKSONVILLE, FL

TITLE PTD
NAME NUSSMEYER, LARRY JOE
STREET ADDRESS 1401 WOOD HILL PLACE
CITY-ST-ZIP JACKSONVILLE, FL

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

**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)(i), 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: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Larry J. Nussmeyer 8/15/05 (904) 733-5599

Date

Daytime Phone #