## 2012 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F93000003776

Entity Name: ADAMS REMCO, INC.

FILED Jan 11, 2012 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

3611 ST. JOHNS BLUFF RD. STE 14

JACKSONVILLE, FL 32224

Current Mailing Address: New Mailing Address:

P.O. BOX 3968

SOUTH BEND, IN 466190968 US

FEI Number: 35-0846435 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

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

CARLILE, REX 3611 ST JOHN BLUFF RD STE. 14 JACKSONVILLE, FL 32224 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

## **OFFICERS AND DIRECTORS:**

Title: C

Name: CARLILE, REX

Address: 2612 FOUNDATION DRIVE City-St-Zip: SOUTH BEND, IN 46628

Title: VC

Name: CARLILE, HELEN
Address: 2612 FOUNDATION DRIVE
City-St-Zip: SOUTH BEND, IN 46628

Title: F

Name: CARLILE, DONALD
Address: 2612 FOUNDATION DRIVE
City-St-Zip: SOUTH BEND, IN 46628

Title: \

Name: CARLILE, DEAN

Address: 2612 FOUNDATION DRIVE City-St-Zip: SOUTH BEND, IN 46628

Title: \

Name: RIGGS, DAVID

Address: 2612 FOUNDATION DRIVE City-St-Zip: SOUTH BEND, IN 46628

Title: ST

Name: RIGGS, KATHY

Address: 2612 FOUNDATION DRIVE City-St-Zip: SOUTH BEND, IN 46628

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: DONALD CARLILE P 01/11/2012