

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# G08483

Entity Name: ADRON FENCE CO.

**FILED**  
**Feb 02, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

1132 NE 12TH STREET  
OKEECHOBEE, FL 34972

**New Principal Place of Business:**

**Current Mailing Address:**

1132 NE 12TH STREET  
OKEECHOBEE, FL 34972

**New Mailing Address:**

FEI Number: 59-2241665

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

CHAMBERS, ROSS A  
6131 NW GINGER LANE  
PORT SAINT LUCIE, FL 34986 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: S  
Name: CHAMBERS, BILLY JACK  
Address: 17101 NW 38TH AVE.  
City-St-Zip: OKEECHOBEE, FL 34972

Title: V  
Name: CHAMBERS, TRAVIS  
Address: 1300 S.W. 10TH AVE.  
City-St-Zip: OKEECHOBEE, FL 34974

Title: PT  
Name: CHAMBERS, ROSS  
Address: 6131 NW GINGER LANE  
City-St-Zip: PORT SAINT LUCIE, FL 34986

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: ROSS CHAMBERS

PT

02/02/2011

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

\_\_\_\_\_  
Date