

2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 14, 2007 8:00 am
Secretary of State

01-24-2007 90047 021 ***150.00

DOCUMENT # J12210 1. Entity Name NICKERSON FAMILY ENTERPRISES, INC.					
Principal Place of Business 4701 U.S. 27 SOUTH SEBRING FL 33870			Mailing Address 4701 U.S. 27 SOUTH SEBRING FL 33870		
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 59-2426199 ☐ Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent NICKERSON, FLOYD W. 4701 U.S. 27 SOUTH SEBRING FL 33870			7. Name and Address of New Registered Agent Name Jennie Nickerson Street Address (P.O. Box Number is Not Acceptable) 4701 U.S. 27 South City Sebring FL Zip Code 33870		
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 <u><i>Jennie Nickerson</i></u> Jennie Nickerson Sec 1-19-07 Signature, name or printed name of registered agent and fee, if applicable. (Name of Registered Agent must be typed when not signed.)					
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee Will Be \$550.00 Make Check Payable to Florida Department of State			9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution ☐ Added to Fees		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY, ST, ZIP	PD NICKERSON, FLOYD WILLARD 1443 CIRCLE DRIVE SEBRING FL 33872	☐ Delete	TITLE NAME STREET ADDRESS CITY, ST, ZIP	Floyd Willard Nickerson 1435 Pine Tree Circle Sebring FL 33875	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY, ST, ZIP	ST NICKERSON, JENNIE LEE 1443 CIRCLE DRIVE SEBRING FL	☐ Delete	TITLE NAME STREET ADDRESS CITY, ST, ZIP	Jennie Nickerson 1435 Pine Tree Circle Sebring FL 33875	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY, ST, ZIP	VP NICKERSON, DAVID 2023 ANDALUS AST SEBRING FL	☐ Delete	TITLE NAME STREET ADDRESS CITY, ST, ZIP	David Nickerson - Troy 4956 Mendavia Dr Sebring FL 33872	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY, ST, ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY, ST, ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY, ST, ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY, ST, ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY, ST, ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY, ST, ZIP		☐ Change ☐ Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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: <u><i>Jennie Nickerson</i></u> Jennie Nickerson ST 1-19-07 863 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					

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