

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000004702

FILED
Apr 16, 2011
Secretary of State

Entity Name: SCHRECKENGHAUST, MICHEL & PACK, INC.

Current Principal Place of Business:

104 CAPRI ISLE BLVD
UNIT 109
VENICE, FL 34292

New Principal Place of Business:

Current Mailing Address:

P.O.BOX 38
NOKOMIS, FL 34274

New Mailing Address:

FEI Number: 56-2365631

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CARPENTER, THOMAS A JR.
333 SOUTH TAMiami TrL.
#384
VENICE, FL 34285 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: PRES
Name: SCHRECKENGHAUST, REX
Address: 104 CAPRI ISLE BLVD UNIT 109
City-St-Zip: VENICE, FL 34292

Title: VP
Name: ROYALTY, ED
Address: 4716 WILLIAMS ST.
City-St-Zip: RAPID CITY, SD 57703

Title: STD
Name: PACK, JOHN
Address: 104 CAPRI ISLE BLVD UNIT 109
City-St-Zip: VENICE, FL 34292

Title: D
Name: ARMSTRONG, SHIRLEY A
Address: 440 E SHADE DR.
City-St-Zip: VENICE, FL 34293

Title: D
Name: RYAN, TIMOTHY J
Address: 505 PURSLANE
City-St-Zip: VENICE, FL 34293

Title: D
Name: KINGSLEY, ERIC
Address: 7829 PINE TRACE DR.
City-St-Zip: SARASOTA, FL 34243

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: REX SCHRECKENGHAUST

PRES

04/16/2011

Electronic Signature of Signing Officer or Director

Date