

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P00000110459

**Entity Name:** A + ADJUSTMENT CO., INC.

**FILED**  
**Jan 07, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

1323 WOODINGHAM DR.  
ROCKLEDGE, FL 32955 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 560775  
ROCKLEDGE, FL 32956 US

**New Mailing Address:**

**FEI Number:** 65-1062158

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

NYE, CONNIE  
1323 WOODINGHAM DRIVE  
ROCKLEDGE, FL 32955 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:** DPVT  
**Name:** NYE, CONNIE  
**Address:** 1323 WOODINGHAM DRIVE  
**City-St-Zip:** ROCKLEDGE, FL 32955 US

**Title:** S  
**Name:** FRISCHHOLZ, EDWARD  
**Address:** 1323 WOODINGHAM DRIVE  
**City-St-Zip:** ROCKLEDGE, FL 32955 US

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:** CONNIE NYE

DPVT

01/07/2011

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

\_\_\_\_\_  
Date