2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 16, 2009
Secretary of State

DOCUMENT# P03000092869

Entity Name: MICAH SERVICES, INC.

Current Principal Place of Business:

P.O. BOX 2703
TITUSVILLE, FL 32781

New Principal Place of Business:

2125 SILVER STAR RD
TITUSVILLE, FL 32796

Current Mailing Address:

P.O. BOX 2703
TITUSVILLE, FL 32781

New Mailing Address:

FEI Number: 65-1200686 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

NIX, MICAH E
1400 N CARPENTER RD
TITUSVILLE, FL 32796 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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PSTD ( ) Delete
Name: NIX, MICAH E
Address: P.O. BOX 6027
City-St-Zip: TITUSVILLE, FL 32782

Title: VP ( ) Delete
Name: EASLEY, CHAD G
Address: 3300 GRAND PERRIN ROAD
City-St-Zip: MIMS, FL 32754

Title: S ( ) Delete
Name: NIX, SUMMER L
Address: PO BOX 6027
City-St-Zip: TITUSVILLE, FL 32782 US

Title: T ( ) Delete
Name: MORAN, JOSEPH T
Address: 411 POINSETTIA AVE
City-St-Zip: TITUSVILLE, FL 32796 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD (X) Change ( ) Addition
Name: NIX, MICAH E
Address: P.O. BOX 2703
City-St-Zip: TITUSVILLE, FL 32781

Title: VP (X) Change ( ) Addition
Name: EASLEY, CHAD G
Address: PO BOX 2703
City-St-Zip: TITUSVILLE, FL 32781

Title: S (X) Change ( ) Addition
Name: NIX, SUMMER L
Address: PO BOX 2703
City-St-Zip: TITUSVILLE, FL 32781 US

Title: T (X) Change ( ) Addition
Name: MORAN, JOSEPH T
Address: PO BOX 2703
City-St-Zip: TITUSVILLE, FL 32781 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: MICAH E. NIX PSTD 04/16/2009
Electronic Signature of Signing Officer or Director Date