

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000132516

**FILED**  
**Feb 18, 2011**  
**Secretary of State**

**Entity Name:** STRICKLY INSTALLATIONS, INC.

**Current Principal Place of Business:**

511 N SAINT CLAIR ABRAMS AVE  
TAVARES, FL 32778 US

**New Principal Place of Business:**

519 N SAINT CLAIR ABRAMS AVE  
TAVARES, FL 32778 US

**Current Mailing Address:**

511 N SAINT CLAIR ABRAMS AVE  
TAVARES, FL 32778 US

**New Mailing Address:**

519 N SAINT CLAIR ABRAMS AVE  
TAVARES, FL 32778 US

**FEI Number:** 19-3544387

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

GETZ, JONATHAN  
511 N SAINT CLAIR ABRAMS AVE  
TAVARES, FL 32778 US

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

GETZ, JONATHAN  
519 N SAINT CLAIR ABRAMS AVE  
TAVARES, FL 32778 US

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:

02/18/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: GETZ, JONATHAN R  
Address: 519 N SAINT CLAIR ABRAMS AVE  
City-St-Zip: TAVARES, FL 32778 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: JONATHAN R GETZ

PD

02/18/2011

Electronic Signature of Signing Officer or Director

Date