

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000071828

FILED  
Apr 06, 2011  
Secretary of State

**Entity Name:** ADAM SCHWARTZ CUSTOM FRAMING, INC.

**Current Principal Place of Business:**

4312 LAKE GRIFFIN RD  
LADY LAKE, FL 32159

**New Principal Place of Business:**

**Current Mailing Address:**

4312 LAKE GRIFFIN RD  
LADY LAKE, FL 32159

**New Mailing Address:**

**FEI Number:** 16-1699674

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SCHWARTZ, ADAM  
4312 LAKE GRIFFIN RD  
LADY LAKE, FL 32159 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:** DPTS  
**Name:** SCHWARTZ, ADAM DPTS  
**Address:** 4312 LAKE GRIFFIN RD  
**City-St-Zip:** LADY LAKE, FL 32159

**Title:** D  
**Name:** SCHWARTZ, R. D  
**Address:** 1800 JOHNSON RD  
**City-St-Zip:** BESEGEMER, MI

**Title:** D  
**Name:** SPURGEON, L. D  
**Address:** 1517 SAXMAN AVE  
**City-St-Zip:** MORGON TOWN, WV

**Title:** D.  
**Name:** SCHWARTZ, B. J D.  
**Address:** 4312 LAKE GRIFFIN RD.  
**City-St-Zip:** LADY LAKE, FL 32159

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:** ADAM SCHWARTZ

DPTS

04/06/2011

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

\_\_\_\_\_  
Date