

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 06, 2006 8:00 am
Secretary of State

02-06-2006 90059 006 ***150.00

DOCUMENT # P04000168076

1. Entity Name
VICKERS FAMILY RENTALS, INC.



Principal Place of Business
**1048 US HIGHWAY 27 SOUTH
AVON PARK, FL 33825**

Mailing Address
**1048 US HIGHWAY 27 SOUTH
AVON PARK, FL 33825**

2. Principal Place of Business
1116 Billy Martin Road
Suite, Apt. #, etc.

3. Mailing Address
1116 Billy Martin Road
Suite, Apt. #, etc.

City & State
Avon Park, FL

City & State
Avon Park, FL

01192006 Chg-P CR2E034 (11/05)

4. FEI Number
20-2163400

Applied For
Not Applicable

Zip
33825

Country

Zip
33825

Country

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**VICKERS, PAMELA
1048 US HIGHWAY 27 SOUTH
AVON PARK, FL 33825**

7. Name and Address of New Registered Agent

Name **Pamela Vickers**

Street Address (P.O. Box Number is Not Acceptable)

1116 Billy Martin Road

City **Avon Park**

FL

Zip Code **33825**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Pamela Vickers

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

2/2/06

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**DPS
VICKERS, PAMELA
1048 US HIGHWAY 27 SOUTH
AVON PARK, FL 33825** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**DTV
VICKERS, EDWARD D
1048 US HIGHWAY 27 SOUTH
AVON PARK, FL 33825** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
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TITLE
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CITY-ST-ZIP
☐ Delete

TITLE
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STREET ADDRESS
CITY-ST-ZIP
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**1116 Billy Martin Road
Avon Park, FL 33825** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**1116 Billy Martin Road
Avon Park, FL 33825** ☒ Change ☐ Addition

TITLE
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CITY-ST-ZIP
☐ Change ☐ Addition

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☐ Change ☐ Addition

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NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Pamela Vickers

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/2/06

Date

(863) 453-0684

Daytime Phone #