

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P05000007470

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

**Entity Name:** MADE IN THE SHADE BEACH SERVICES, INC.

**Current Principal Place of Business:**

50 HUNTMASER COURT  
ORMOND BEACH, FL 32174

**New Principal Place of Business:**

**Current Mailing Address:**

50 HUNTMASER COURT  
ORMOND BEACH, FL 32174

**New Mailing Address:**

**FEI Number:** 20-2130464

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

NORDSTROM, ERIK  
50 HUNTMASER COURT  
ORMOND BEACH, FL 32174 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: PS  
Name: NORDSTROM, ERIK  
Address: 50 HUNTMASER COURT  
City-St-Zip: ORMOND BEACH, FL 32174

Title: VT  
Name: NORDSTROM, MELANIE  
Address: 50 HUNTMASER COURT  
City-St-Zip: ORMOND BEACH, FL 32174

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: MELANIE NORDSTROM

VT

01/07/2011

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

\_\_\_\_\_  
Date