

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000000626

FILED
Jan 07, 2010
Secretary of State

Entity Name: OUTDOOR EXPERIENCE, INC.

Current Principal Place of Business:

9960 SW CICERO LANE
PORT ST. LUCIE, FL 34986

New Principal Place of Business:

112 SE VIA VERONA
PORT ST. LUCIE, FL 34984

Current Mailing Address:

9960 SW CICERO LANE
PORT ST. LUCIE, FL 34986

New Mailing Address:

112 SE VIA VERONA
PORT ST. LUCIE, FL 34984

FEI Number: 20-4033061

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ECHOLS, WILLIAM I
9960 SW CICERO LANE
PORT ST. LUCIE, FL 34986 US

Name and Address of New Registered Agent:

ECHOLS, WILLIAM I
112 SE VIA VERONA
PORT ST. LUCIE, FL 34984 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: WILLIAM ECHOLS

01/07/2010

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PRES
Name: ECHOLS, WILLIAM I
Address: 112 SE VIA VERONA
City-St-Zip: PORT ST. LUCIE, FL 34984

Title: VP
Name: ECHOLS, BRYAN L
Address: 5555 MONTICELLO DR.
City-St-Zip: CONCORD, NC 28027

Title: SEC
Name: ECHOLS, TERRIE D
Address: 112 SE VIA VERONA
City-St-Zip: PORT SAINT LUCIE, FL 34984

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: WILLIAM I ECHOLS

PRES

01/07/2010

Electronic Signature of Signing Officer or Director

Date