

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P06000003655

**FILED**  
**Mar 10, 2011**  
**Secretary of State**

**Entity Name:** NO LIMITS 4X4 ACCESSORIES INC

**Current Principal Place of Business:**

519 CHARLOTTE ROAD  
AUBURNDALE, FL 33823

**New Principal Place of Business:**

**Current Mailing Address:**

519 CHARLOTTE ROAD  
AUBURNDALE, FL 33823

**New Mailing Address:**

**FEI Number:** 02-0763582

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MYERS, MICHAEL A  
327 BAY STREET  
AUBURNDALE, FL 33823 US

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

MYERS, MICHAEL A  
507 LAKE CUMMINGS WAY  
LAKE ALFRED, FL 33850 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:** MICHAEL A MYERS

03/10/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

**Title:** P  
**Name:** MYERS, MICHAEL A  
**Address:** 507 LAKE CUMMINGS WAY  
**City-St-Zip:** LAKE ALFRED, FL 33850

**Title:** S  
**Name:** MYERS, LINDA  
**Address:** 507 LAKE CUMMINGS WAY  
**City-St-Zip:** LAKE ALFRED, FL 33850

**Title:** V  
**Name:** MYERS, JASON  
**Address:** 505 N ECHO  
**City-St-Zip:** LAKE ALFRED, FL 33850

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:** MICHAEL A MYERS

P

03/10/2011

Electronic Signature of Signing Officer or Director

Date