

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P08000110551

Entity Name: M & E SICKMILLER, INC.

**FILED**  
**Feb 15, 2012**  
**Secretary of State**

## **Current Principal Place of Business:**

2626-3 TAMIAMI TR. E.  
SUITE 3  
NAPLES, FL 34112

## **New Principal Place of Business:**

## **Current Mailing Address:**

2626-3 TAMIAMI TR. E.  
SUITE 3  
NAPLES, FL 34112

## **New Mailing Address:**

FEI Number: 26-4192995

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SICKMILLER, MARGARET B  
2626 TAMIAMI TR. E.  
SUITE 3  
NAPLES, FL 34112 US

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

TAX & ACCOUNTING OF SWFL  
809 WALKERBILT ROAD  
SUITE 6  
NAPLES, FL 34110 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: BJ COTTRELL JR

02/15/2012

Electronic Signature of Registered Agent

Date

## **OFFICERS AND DIRECTORS:**

Title: VP  
Name: SICKMILLER, ERIC  
Address: 2626 TAMIAMI TR. E. SUITE 3  
City-St-Zip: NAPLES, FL 34112

Title: P  
Name: SICKMILLER, MARGARET  
Address: 2626 TAMIAMI TR. E.  
City-St-Zip: NAPLES, FL 34112

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: BJ COTTRELL JR

RA

02/15/2012

Electronic Signature of Signing Officer or Director

Date