

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10000073417

FILED  
May 01, 2012  
Secretary of State

Entity Name: PHIL ADAMS INC.

**Current Principal Place of Business:**

5106 BIRCH DR.  
FORT PIERCE, FL 34982

**New Principal Place of Business:**

5106 BIRCH DR.  
FORT PIERCE, FL 34982 UN

**Current Mailing Address:**

5106 BIRCH DR.  
FORT PIERCE, FL 34982

**New Mailing Address:**

FEI Number: 27-3456087

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

ADAMS, PHILLIP B  
5106 BIRCH DR.  
FORT PIERCE, FL 34982 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: P  
Name: ADAMS, PHILLIP B  
Address: 5106 BIRCH DR.  
City-St-Zip: FORT PIERCE, FL 34982

Title: VP  
Name: ADAMS, CHRISTINA C  
Address: 5106 BIRCH DR.  
City-St-Zip: FORT PIERCE, FL 34982

Title: SEC  
Name: ADAMS, CHRISTINA C  
Address: 5106 BIRCH DR.  
City-St-Zip: FORT PIERCE, FL 34982

Title: T  
Name: ADAMS, CHRISTINA C  
Address: 5106 BIRCH DR.  
City-St-Zip: FORT PIERCE, FL 34982

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: PHILLIP ADAMS

P

05/01/2012

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

\_\_\_\_\_ Date