

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P11000007580

**FILED**  
**Feb 07, 2012**  
**Secretary of State**

**Entity Name:** NULEVEL MAINTENANCE SOLUTIONS, INC.

**Current Principal Place of Business:**

644 CAPITAL CIR NE  
TALLAHASSEE, FL 32301 US

**New Principal Place of Business:**

**Current Mailing Address:**

2804 SAW PALMETTO LN  
TALLAHASSEE, FL 32309 US

**New Mailing Address:**

PO BOX 13089  
TALLAHASSEE, FL 32317 US

**FEI Number:**

**FEI Number Applied For ( )**

**FEI Number Not Applicable (X)**

**Certificate of Status Desired ( )**

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

RHINEHART, RODEAN S  
2804 SAW PALMETTO LN  
TALLAHASSEE, FL 32309 US

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

EXECUTIVE MANAGEMENT SERVICES, INC.  
644 CAPITAL CIRCLE NE  
TALLAHASSEE, FL 32301 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: ROBERT S. RHINEHART

02/07/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: RHINEHART, ROBERT S  
Address: 644 CAPITAL CIRCLE NE  
City-St-Zip: TALLAHASSEE, FL 32301 US

Title: VP  
Name: RHINEHART, RODEAN S  
Address: 644 CAPITAL CIRCLE NE  
City-St-Zip: TALLAHASSEE, FL 32301 US

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: ROBERT S. RHINEHART

P

02/07/2012

Electronic Signature of Signing Officer or Director

Date