

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P96000097919

Entity Name: ADDICO INC.

**FILED**  
**Apr 28, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

ADDICO, INC.  
500 PRIVATEER RD.  
NORTH PALM BEACH, FL 33408

**New Principal Place of Business:**

**Current Mailing Address:**

ADDICO, INC.  
500 PRIVATEER RD.  
NORTH PALM BEACH, FL 33408

**New Mailing Address:**

FEI Number: 65-0714989

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

FOLEY, MICHAEL  
500 PRIVATEER RD  
NORTH PALM BEACH, FL 33408 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: PD  
Name: FOLEY, MICHAEL  
Address: 500 PRIVATEER RD  
City-St-Zip: N. PALM BEACH, FL 33408

Title: STD  
Name: FOLEY, ED  
Address: 8210 SPYGLASS  
City-St-Zip: W. PALM BEACH, FL

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 FOLEY

PRES

04/28/2011

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

\_\_\_\_\_  
Date