

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000008661

FILED  
May 01, 2011  
Secretary of State

**Entity Name:** ADAM NICHOLS OUTDOOR SERVICES, INC.

**Current Principal Place of Business:**

13556 ASHFORD WOODS COURT EAST  
JACKSONVILLE, FL 32218

**New Principal Place of Business:**

**Current Mailing Address:**

13556 ASHFORD WOODS COURT EAST  
JACKSONVILLE, FL 32218

**New Mailing Address:**

FEI Number: 20-8283397

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

HOWARD, GARY G CPA  
8421 BAYMEADOWS WAY  
SUITE 4  
JACKSONVILLE, FL 32256 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: NICHOLS, CHRISTOPHER A  
Address: 13556 ASHFORD WOODS COURT EAST  
City-St-Zip: JACKSONVILLE, FL 32218

Title: VP  
Name: NICHOLS, LEAH B  
Address: 13556 ASHFORD WOODS COURT EAST  
City-St-Zip: JACKSONVILLE, FL 32218

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: CHRISTOPHER ADAM NICHOLS

P

05/01/2011

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

\_\_\_\_\_  
Date