

**2017 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F05000006599

**FILED**  
**Jan 09, 2017**  
**Secretary of State**  
**CC4726542640**

**Entity Name:** EASLEY ENTERPRISES, INC.

**Current Principal Place of Business:**

205 N. COLLEGE AVE.  
INDIANAPOLIS, IN 46202

**Current Mailing Address:**

205 N. COLLEGE AVE.  
INDIANAPOLIS, IN 46202 US

**FEI Number:** 35-1321258

**Certificate of Status Desired:** No

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

EASLEY, JOHN L  
253 DOMINICA CIRCLE WEST  
NICEVILLE, FL 32578 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:** \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title P  
Name EASLEY, MARK C  
Address 205 N. COLLEGE AVE.  
City-State-Zip: INDIANAPOLIS IN 46202

Title V  
Name EASLEY, MEREDITH L  
Address 205 N. COLLEGE AVE.  
City-State-Zip: INDIANAPOLIS IN 46202

Title S  
Name EASLEY, MEREDITH L  
Address 205 N. COLLAGE AVE.  
City-State-Zip: INDIANAPOLIS IN 46202

*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:** MARK EASLEY

**PRESIDENT**

**01/09/2017**

Electronic Signature of Signing Officer/Director Detail

Date