2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Feb 27, 2008 8:00 am Secretary of State

1. Entity Nam	MENT # 743099 ADES MEMBERS INC.						2008 9000	, 02 050 ****	61.25	
Principal Plac 1140 BAYSH FT PIERCE, F	IORE DR	Mailing Address 1140 BAYSHORE DR FT PIERCE, FL 34949	,		400	33201	· ·			
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2. Principal P	flace of Business - No P.O. Box #	3. Mailing Address					ED 1011 BIO11 BIO1	I BILU BIEN BIEH EIL	INDI BI HUBI	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			01102008	Chg-NP	CR2	E037 (12/06)		
City & State		City & State		4	1. FEI Numbe 59-183			J	oplied For at Applicable	
Žip	Country	Zip	Country		5. Certificate	of Status Desire	ed. 🗆	\$8.75 Add	itional	
	6. Name and Address of Curren	t Registered Agent		7	. Name and	Address of Ne	w Register	·····		
CORNETT, JANE L ESQ			Name	Name						
CORNETT, JANE I. ESQ CORNETT, GOOGE & ASSOCIATES P.A. 401 E. OSCEOLA STREET			Street A	Street Address (P.O. Box Number is Not Acceptable)						
STUART, I	FL 34994									
	•		City				F	L Zip Cod	е	
	named entity submits this statement lions of registered agent.	for the purpose of changing its re	gistered office or	registered	agent, or bot	th, in the State o	of Florida. 1	am familiar with,	and accept	
	Signature, typed or printed name of registered age:	nt and title if applicable. (NOTE; f	Registered Agent signatu	are required who	en reinstating)		DAT	TE		
	Signature, typed or printed name of registered eger Filling Fee is \$61.25 Due by May 1, 2008	nt and title if applicable. (NOTE: find and title if applicable. 9. Election Camp Trust Fund Coi	aign Financing	\$	5.00 May B	ie	Make ch	eck payable to		
10.	Filing Fee is \$61.25	9. Election Camp Trust Fund Co	aign Financing	\$ \$	5.00 May B		Make ch Florida De	eck payable t	tate	
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

GEGRGE W. GUNTHER

SIGNATURE: SIGNATURE AND AFFED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-10-08

172-464-2177