

FILED
Sep 13, 2004 8:00 am
Secretary of State

09-13-2004 90008 013 ***150.00

**2004 FOR PROFIT CORPORATION
 ANNUAL REPORT**

DOCUMENT # P03000068325 1. Entity Name ADICOM, INC.			
Principal Place of Business 749 SE HIDDEN RIVER DRIVE PORT ST LUCIE, FL 34983		Mailing Address 749 SE HIDDEN RIVER DRIVE PORT ST LUCIE, FL 34983	
2. Principal Place of Business 749 SE Hidden River Dr.		3. Mailing Address 749 SE Hidden River Dr	
Suite, Apt. #, etc.:		Suite, Apt. #, etc.:	
City & State Port St. Lucie, FL		City & State Port St. Lucie, FL	
Zip 34983		Zip 34983	
Country USA		Country USA	
4. FEI Number 20-0049187		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent POPE, GEORGE H 749 SE HIDDEN RIVER DRIVE PORT ST LUCIE, FL 34983		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
8. 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. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE: _____ Signature, typed or printed name of registered agent and fee if applicable. (NOTE: Registered Agent's signature required when submitting)			
FILE NOW!!! FEE IS \$150.00 Due by September 8, 2004		9. Election Campaign Financing Trust Fund Contribution. ☐	
\$5.00 May Be Added to Fees		In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DP POPE, GEORGE H 749 SE HIDDEN RIVER DRIVE PORT ST LUCIE, FL 34983	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete George M. Pope ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DST POPE, DEBORAH T 749 SE HIDDEN RIVER DRIVE PORT ST LUCIE, FL 34983	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 607, 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.			
SIGNATURE: ✓ <i>George M. Pope</i>		✓ Sept. 11, 2004 <i>772873-2990</i>	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Daytime Phone #	

24085039



09102004 Chg-P CR2E034 (10/03)

Attachment
24085039
PO0000068325

September 10, 2004

Division of Corporations

P.O. Box 1500

Tallahassee, FL 32302-1500

To Whom It May Concern:

I am respectfully requesting an abatement of the late filing penalty after September 8, 2004 because of Hurricane Frances.

Sincerely,
George Pope
JMP