

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000071884

Entity Name: FADA SERVICES, INC.

FILED
Apr 10, 2008
Secretary of State

Current Principal Place of Business:

400 NORTH MERIDIAN ST
TALLAHASSEE, FL 32301

New Principal Place of Business:

Current Mailing Address:

400 NORTH MERIDIAN ST
TALLAHASSEE, FL 32301

New Mailing Address:

FEI Number: 59-0951492

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

SMITH, TED L
400 NORTH MERIDIAN ST
TALLAHASSEE, FL 32301 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: C () Delete
Name: MURGADO, MARIO
Address: 665 SW 8TH STREET
City-St-Zip: MIAMI, FL 33130

Title: PC () Delete
Name: CLARK, CINDY
Address: P O BOX 70
City-St-Zip: WILDWOOD, FL 34785

Title: P () Delete
Name: SMITH, TED L
Address: 400 N MERIDIAN STREET
City-St-Zip: TALLAHASSEE, FL 32301

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: C (X) Change () Addition
Name: KAISER, DERIC
Address: P. O. BOX 2813
City-St-Zip: DELAND, FL 32721

Title: PC (X) Change () Addition
Name: MURGADO, MARIO
Address: 665 SW 8TH STREET
City-St-Zip: MIAMI, FL 33130

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: T () Change (X) Addition
Name: CRAMER, COMPTON
Address: 900 S US 41 BY-PASS
City-St-Zip: VENICE, FL 34285

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: TED L SMITH

P

04/10/2008

Electronic Signature of Signing Officer or Director

_____ Date