

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000089378

FILED  
Apr 10, 2008  
Secretary of State

Entity Name: AMERICANS DEVELOPING AND PRESERVING TOGETHER, INC.

**Current Principal Place of Business:**

4850 ST JAMES AVE  
TITUSVILLE, FL 32780

**New Principal Place of Business:**

**Current Mailing Address:**

300 FIFTH AVE SOUTH  
SUITE 101-200  
NAPLES, FL 34102

**New Mailing Address:**

FEI Number: 65-0985310      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

WATTS, RENITA  
4850 ST JAMES AVE  
TITUSVILLE, FL 32780      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: PRES ( ) Delete  
Name: BOB, JOHNSTON  
Address: PO BOX 169  
City-St-Zip: HOUSTON, AR 72070

Title: SECR ( ) Delete  
Name: EDDLEMON, MARLEEN  
Address: 2309 LINDA LN  
City-St-Zip: JACKSONVILLE, AR 72076

Title: TREA ( ) Delete  
Name: WOLFF, GEORGE  
Address: 2802 MILLBROOK  
City-St-Zip: LITTLE ROCK, AR 722213038

Title: M ( ) Delete  
Name: CULPEPPER, JASON  
Address: 7310 WESTRIDGE CIRCLE  
City-St-Zip: SHERWOOD, AR 72120

Title: MEM ( ) Delete  
Name: DAVIS, RON  
Address: 311 BOBWHITE  
City-St-Zip: LONOKE, AR 72086

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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

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

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

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: MARLEEN EDDLEMON

SEC

04/10/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date