## 2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N0200003592

Entity Name: ACTIVE DISABLED AMERICANS, INC.

## **Current Principal Place of Business:**

225 UPPER MATECUMBE RD KEY LARGO. FL 33037

# **Current Mailing Address:**

225 UPPER MATECUMBE RD KEY LARGO, FL 33037

# FEI Number: 46-0481278

### Name and Address of Current Registered Agent:

NEALEY, MICHAEL EDP 225 UPPER MATECUMBE RD KEY LARGO, FL 33037 US

### Certificate of Status Desired: No

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

### **Officer/Director Detail :**

| Title           | DP                     | Title           | DV                          |
|-----------------|------------------------|-----------------|-----------------------------|
| Name            | NEALEY, MICHAEL        | Name            | KERRY, GRUSON               |
| Address         | 225 UPPER MATECUMBE RD | Address         | 1000 VENETION WAY APT 404   |
| City-State-Zip: | KEY LARGO FL 33037     | City-State-Zip: | MIAMI BEACH FL 33139        |
|                 |                        |                 |                             |
|                 |                        |                 |                             |
| Title           | DS                     | Title           | SECRETARY                   |
| Title<br>Name   | DS<br>NEALEY, JOYCE    | Title<br>Name   | SECRETARY<br>NICHOLE, RIDER |
|                 |                        |                 |                             |

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

#### SIGNATURE: MICHAEL NEALEY

Electronic Signature of Signing Officer/Director Detail

DP

# FILED Feb 09, 2017 Secretary of State CC9275074086

Date