

**2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N09000007782

**FILED**  
**Apr 29, 2019**  
**Secretary of State**  
**9459397182CC**

**Entity Name:** AMERICAN DISABILITY ADVENTURES, INC.

**Current Principal Place of Business:**

7940 CHASE RD  
LAKELAND, FL 33810

**Current Mailing Address:**

P.O. BOX 730  
KATHLEEN, FL 33849

**FEI Number:** 27-0668319

**Certificate of Status Desired:** No

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

BLOMMEL, MARGARET  
7940 CHASE RD  
LAKELAND, FL 33810 US

*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

**Officer/Director Detail :**

Title SECRETARY  
Name MCINTOSH, KRYSTAL  
Address PO BOX 576  
City-State-Zip: SUMTERVILLE FL 33585

Title PRESIDENT  
Name BLOMMEL, BILL  
Address 7940 CHASE RD  
City-State-Zip: LAKELAND FL 33810

Title DIRECTOR  
Name MCINTOSH, MARK  
Address PO BOX 576  
City-State-Zip: SUMTERVILL FL 33585

Title TREASURER  
Name BLOMMEL, MARGARET  
Address 7940 CHASE RD  
City-State-Zip: LAKELAND FL 33810

Title VP  
Name WARD, TRAVIS  
Address 3948 SR 33  
City-State-Zip: CLERMONT FL 34714

Title DIRECTOR  
Name MEADOR, TRENT  
Address P.O. BOX 1082  
City-State-Zip: KATHLEEN FL 33849

Title BOARD MEMBER  
Name HATFIELD, SUZANNE  
Address 14082 MARINO DRIVE  
City-State-Zip: ORLANDO FL 32832

Title BOARD MEMBER  
Name MOORE, JOHN  
Address 3948 SR 33  
City-State-Zip: CLERMONT FL 34714

*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: MARGARET BLOMMEL**

**TREASURER**

**04/29/2019**

Electronic Signature of Signing Officer/Director Detail

Date