

**2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# V00068

**Entity Name:** ADAMO DRIVE, INC.

**Current Principal Place of Business:**

1237 E. TWIGGS ST.  
TAMPA, FL 33602

**Current Mailing Address:**

1237 E. TWIGGS ST.  
TAMPA, FL 33602

**FEI Number:** 59-3102679

**Certificate of Status Desired:** No

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

WILLIAMS, III, J. HULON  
1237 E. TWIGGS ST.  
TAMPA, FL 33602 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	D	Title	D
Name	WILLIAMS, PATRICIA F	Name	WILLIAMS, J. HULON III
Address	1237 E. TWIGGS ST.	Address	1237 E. TWIGGS ST.
City-State-Zip:	TAMPA FL 33602	City-State-Zip:	TAMPA FL 33602

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

**SIGNATURE:** J. HULON WILLIAMS III

**D**

**04/10/2014**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date