

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000011135

Entity Name: A.D.E., L.L.C.

Current Principal Place of Business:

959 W. 15TH STREET
PANAMA CITY, FL 32401

Current Mailing Address:

959 W. 15TH STREET
PANAMA CITY, FL 32401

FEI Number: 90-0595563

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

SLOAN, TIMOTHY J
427 MCKENZIE AVE.
PANAMA CITY, FL 32401 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

Authorized Person(s) Detail :

Title OTHER
Name KIMBERLEIGH HILL, SPOUSE AND HEIR OF CHRISTOPHER A. HILL (DECEASED), AND DESIGNATED PERSONAL REPRESENTATIVE OF THE ESTATE OF CHRISTOPHER A. HILL
Address 959 W. 15TH STREET
City-State-Zip: PANAMA CITY FL 32401

Title MANAGING MEMBER
Name GLENN, KAYLA HILL
Address 959 W. 15TH STREET
City-State-Zip: PANAMA CITY FL 32401

Title MANAGING MEMBER
Name FINLEY, SANDRA D., TRUSTEE OF THE GREGORY C FINLEY REVOCABLE TRUST
Address 959 W. 15TH STREET
City-State-Zip: PANAMA CITY FL 32401

Title MANAGING MEMBER
Name FINLEY, GREGORY C., TRUSTEE OF THE SANDRA D FINLEY REVOCABLE TRUST
Address 959 W. 15TH STREET
City-State-Zip: PANAMA CITY FL 32401

Title MANAGING MEMBER
Name HILL, BRONSON
Address 959 W. 15TH STREET
City-State-Zip: PANAMA CITY FL 32401

Title MANAGING MEMBER
Name FINLEY, GREGORY C., TRUSTEE OF THE GREGORY C FINLEY REVOCABLE TRUST
Address 959 W. 15TH STREET
City-State-Zip: PANAMA CITY FL 32401

Title MANAGING MEMBER
Name FINLEY, SANDRA D., TRUSTEE OF THE SANDRA D FINLEY REVOCABLE TRUST
Address 959 W. 15TH STREET
City-State-Zip: PANAMA CITY FL 32401

Title MANAGING MEMBER
Name FINLEY, SANDRA D., TRUSTEE OF THE FINLEY CHILDREN'S TRUST
Address 959 W. 15TH STREET
City-State-Zip: PANAMA CITY FL 32401

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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: GREGORY C. FINLEY

MANAGING MEMBER

04/30/2015

Electronic Signature of Signing Authorized Person(s) Detail

_____ Date