

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra B. Northam
Secretary of State
DIVISION OF CORPORATIONS

**APPROVED
AND
FILED**

95 MAY -1 AM 9:22

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 143132 (9)

1. Corporation Name

AMERICAN DEVELOPMENT CORPORATION

Principal Place of Business

**2980 SOUTH ATLANTIC AVE.
DAYTONA BEACH FL 32118-8002**

Mailing Address

**2980 SOUTH ATLANTIC AVE.
DAYTONA BEACH FL 32118-8002**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

07/18/1944

3a. Date of Last Report

03/10/1994

2. Principal Place of Business

21

2a. Mailing Address

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

4. FEI Number

22-1841061

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution

☐

**\$5.00 May Be
Added to Fees**

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes

☐ Yes

☐ No

9. Name and Address of Current Registered Agent

**TUMBLESON, J. DOYLE
150 S. PALMETTO AVE.
DAYTONA BEACH FL 32014**

10. Name and Address of New Registered Agent

81. Name

82. Street Address (P.O. Box Number is Not Acceptable)

83.

84. City

FL

85. Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

**DC
NORTON, DONN H.
FOUR BECKER FARM RD.
ROSELAND NJ**

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

**JD
UANINO, ANTHONY
2980 S. ATLANTIC AVE.
NEW YORK NY**

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

**D
COLLINS, J
2980 S ATLANTIC AVE
DAYTONA BCH SHRS, FL 00000**

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

**JOS
HUGGINS, PAMELA L
2980 S ATLANTIC AVE
DAYTONA BCH SHRS, FL**

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

**GROSSEBL, ERIC
FOUR BECKER FARM RD.
ROSELAND NJ**

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

**P
HENDERSON, R. DON
2980 S ATLANTIC AVE.
DAYTONA BCH SHRS FL**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(b), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Anthony Uanino
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Anthony Uanino

4/10/95

904-761-9600