SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 8, 1995.
AMOUNT DUE ON OR BEFORE 8/8/95: $225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $378)

PROFIT CORPORATION ANNUAL REPORT

1995

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

APPROVED AND FILED

95 JUL -5 AM 8:41

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 678713 (9)

1. Corporation Name

ADLER INVESTMENTS, INC.

Principal Place of Business	Mailing Address
201 S. TAMIAMI TRAIL HWY 41 SOUTH RUSKIN FL 33570	201 S. TAMIAMI TRAIL HWY 41 SOUTH RUSKIN FL 33570

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 07/16/1980	3a. Date of Last Report: 04/27/1994
4. FEI Number: 59-2030126	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. Florida Statutes ☒ Yes ☐ No	

2. Principal Place of Business (21) / 2a. Mailing Address (26)
Suite, Apt. #, etc. (22) / Suite, Apt. #, etc. (27)
City & State (23) / City & State (28)
(24) (25) (29) (30)

9. Name and Address of Current Registered Agent

MIXON JR., CHARLES F.
1112 E. KENNEDY BLVD
TAMPA FL 33602

10. Name and Address of New Registered Agent

(81) Name
(82) Street Address (P.O. Box Number is Not Acceptable)
(83)
(84) City / (85) Zip Code
FL

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 _____ (Agent) _____ (Registered Agent signature required when applicable) _____ (Date)

12. OFFICERS AND DIRECTORS		13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS IN 12	
(11) TITLE	PD	(11) TITLE	☐ Change ☐ Addition
(12) NAME	RUSSELL, ALICE	(12) NAME	
(13) STREET ADDRESS	201 S TAMIAMI TRAIL	(13) STREET ADDRESS	
(14) CITY, ST, ZIP	RUSKIN FL	(14) CITY, ST, ZIP	
(21) TITLE	D	(21) TITLE	☐ Change ☐ Addition
(22) NAME	GREWING, MARGARET ANN	(22) NAME	
(23) STREET ADDRESS	111 BESSEMER CRCL	(23) STREET ADDRESS	
(24) CITY, ST, ZIP	BRANDON FL	(24) CITY, ST, ZIP	
(31) TITLE	DV	(31) TITLE	☐ Change ☐ Addition
(32) NAME	DOBSON JR, THOMAS W	(32) NAME	
(33) STREET ADDRESS	3007 SATURN DR	(33) STREET ADDRESS	
(34) CITY, ST, ZIP	ROME NY	(34) CITY, ST, ZIP	
(41) TITLE	DST	(41) TITLE	☐ Change ☐ Addition
(42) NAME	GREWING, DOUGLAS D	(42) NAME	
(43) STREET ADDRESS	111 BESSEMER CRCL	(43) STREET ADDRESS	
(44) CITY, ST, ZIP	BRANDON FL	(44) CITY, ST, ZIP	
(51) TITLE	D	(51) TITLE	☐ Change ☐ Addition
(52) NAME	DOBSON, MARY JANE R.	(52) NAME	
(53) STREET ADDRESS	3007 SATURN DR	(53) STREET ADDRESS	
(54) CITY, ST, ZIP	ROME NY	(54) CITY, ST, ZIP	
(61) TITLE		(61) TITLE	☐ Change ☐ Addition
(62) NAME		(62) NAME	
(63) STREET ADDRESS		(63) STREET ADDRESS	
(64) CITY, ST, ZIP		(64) 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)(i), 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: Alice W. Russell ALICE W RUSSELL 4/24/95 813/645-6446
(SIGNATURE AND TYPED OR PRINTED NAME OF NEW OFFICER OR DIRECTOR) (Telephone)

CR2E034 (3/95)

0163710 FP