2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 678713

Entity Name: ADLER INVESTMENTS, INC.

FILED Feb 20, 2009 Secretary of State

Current Principal Place of Business:			New Prin	New Principal Place of Business:	
620 -24TH AVE SW RUSKIN, FL 33570 US					
Current Mailing Address:			New Mai	New Mailing Address:	
PO BOX 1008 RUSKIN, FL 33575					
FEI Number: 59-2030126 FEI Number Applied For () FEI Nu		FEI Number Not Ap	pplicable () Certificate of Status Desired ()		
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
MIXON JR., CHARLES F. 1112 E. KENNEDY BLVD 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	
Election Campaign Financing Trust Fund Contribution ().					
OFFICERS AND DIRECTORS:			ADDITIO	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PD ()E RUSSELL, ALICE 620 24 AVE SW RUSKIN, FL 335	POB 1008	Title: Name: Address: City-St-Zip:	PD (X) Change () Addition RUSSELL, ALICE W 620 24 AVE SW POB 1008 o: RUSKIN, FL 33570	
Title: Name: Address: City-St-Zip:	D ()E GREWING, MAR 2213 HICKORY F VALRICO, FL 33	RIDGE DR	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	DOBSON, JR T	Delete DSHIRE CRESCENT 7030	Title: Name: Address: City-St-Zip:	DV (X) Change () Addition DOBSON, JR T 3819 S. NINE DR. D: VALRICO, FL 33596	
Title: Name: Address: City-St-Zip:	DST () E GREWING, DOU 2213 HICKORY F VALRICO, FL 33	RIDGE DR	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	DOBSON, MÀRY	SHIRE CRESCENT	Title: Name: Address: City-St-Zip:	D (X) Change () Addition DOBSON, MARY JANE R 3819 S. NINE DR. VALRICO, FL 33596	
Title: Name: Address: City-St-Zip:	D () ERUSSELL, W.H. 620-24 AVE SW RUSKIN, FL 335		Title: Name: Address: City-St-Zip:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: ALICE W. RUSSELL PRES 02/20/2009