## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## **FILED** Feb 27, 1999 8:00 am Secretary of State

02-27-1999 90044 018 \*\*\*150.00

## DOCUMENT # 681273

1. Corporation Name

AD INDUSTRIES, INC.

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Principal Place of Business Mailing Address												
208 BLUFFWOOD DR. 208 BLUFFWOOD DR.						1						
DANVILLE KY	10422		DANVILLE KY 40422				_ =			_		
US		US	US				DO NOT WRITE IN THIS SPACE					
}						3.	Date Incorporated or Qualifed 08/06/1980					
Principal Place of Business 2a. Mailing Address				<del>-</del>			FEI Number			Apr	lied For	
21	26						59-2017705			Not	Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.			1-			\$8.	75 A	dditional	
22		27	$\tilde{i}$			5.	Certifcate of Status Desired		Fe	e Rec	quired	
City & Stat	e		City & State			6	Election Campaign Financing		\$5	00 :	May Be	
23		28	<del>-</del> 7			"	Trust Fund Contribution				Fees	
Zip				ntry			This corporation owes the curre	ent vear Inte	annible			
	25	29	30	— ·			Personal Property Tax.	ant your mit	Yes	. 1	□No	
24	9. Name and Address of Current		30			40	Name and Address of New R	egistered /				
	9. Haile and Address of Current	r Kagisterad Againt		81	Name	10.	Traine direct ladies of 1100 i.	-9.010.04				
COT	D, JOHN D.,											
639 E. OCEAN AVE., #305				82 Street Add			ddress (P.O. Box Number is Not Acceptable)					
BOYNTON BEACH FL 33435												
001	INTOIN BEACH I'E 30405			83								
				84	City		<del></del>		85	Zip C	ode	
					•			FL	1 1	_ `	}	
11. Pursuant	to the provisions of Sections 607.0502	and 607,1508, Florida Statu	ites, the al	ove	-named corpo	ration	submits this statement for the	ourpose of	changir	ıg its r	egistered	
office or re	egistered agent, or both, in the State of medical from the state of the following state of the s	of Florida, Such change was ions of Section 607 0505. Fl	authorized orida Stati	by 1 ites	the corporation	n's bo	pard of directors. I hereby accep	t the appoir	ıtment a	as reg	istered	
agent. Fai	III fattiliai with, and accept the obligat	10113-51, Geolidii Gott.Good, 11	Ongu Clair								Ì	
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable. (NOT	E: Registered	Agent	signature required	when re	einstating)	DATE				
12.	OFFICERS ANI		13.		_ <del>-</del>	7	ADDITIONS/CHANGES TO OFF	ICERS AN	D DIRE	CTO	RS IN 12	
TITLE	V	☐ DELETE	1.1 TH	LE					☐ Cha		Addition	
NAME	DEMAREST, GEORGE		1.2 NA	ME	1		. 3	•			1	
	COOR MUCHAND DD			1.3 STREET ADDRES		R	(ا كمصويت بريدان	41 VC		•	J	
STREET ADDRESS	HILLIAMORUPO VA			1.4 City-ST-ZIP		\.	11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	سروب				
CITY-ST-ZIP		O DELETE			-ZIP	124	Bluggeneral D Willey Ky. 4042		Cha	nne	Addition	
TITLE	DP	☐ DELETE	2.1 Π		Į		' 0			n/gc		
NAME	DEMAREST, ANNE D			ME				5 :	_			
STREET ADDRESS	2288 W. ISLAND RD.			2.3 STREET ADDRESS		208 Blueewood Drive						
CITY-ST-ZIP	WILLIAMBURG VA		2.4 CI	TY-51	T-ZIP D	<u>au</u>	ville K. 4042	-2-			4	
TITLE	STD	☐ DELETE	3.1 717	LE			1 3		Cha	nge	Addition	
NAME	tombul, desiree		3.2 NA	ME	ŀ							
STREET ADDRESS	226 NORTH 4TH STREET		3.3 ST	REET	ADDRESS 1	380	Chrisman La Wille, Ky 404	Luca.			Ì	
CITY-ST-ZIP	DANVILLE KY 40422		3.4. CF	TY-S1	r-ziP	سخا	dille Kee 404	22				
TITLE		☐ DELETE	4.1 TiT				<del></del>		Cha	inge	☐ Addition	
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-			4.4 CIT								j	
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		L. V.L	5.2 NA						_	~	_	
NAME					ADORESS							
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CITY-ST-ZIP			5.4 CIT		-21r				Cha		Addition	
TITLE		DELETE	6.1 TIT		1		•		□ cus	nge	☐ Modition	
NAME			6.2 NA									
STREET ADDRESS			6.3 ST	REET	ADDRESS							

14. I hereby certify that the information supplied with this filing 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 of supplemental annual eport 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, with all other like empowered.

**SIGNATURE** 

606-238-733/