

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2008 8:00 am
Secretary of State

04-28-2008 90329 001 ***150.00

DOCUMENT # F01000005392

1. Entity Name
MEDADV CORPORATION



Principal Place of Business
**2100 E. GRAND AVENUE -
EL SEGUNDO, CA 90245**

Mailing Address
**2100 E. GRAND AVENUE
EL SEGUNDO, CA 90245**

40083750



2. Principal Place of Business - No P.O. Box #
3170 Fairview Park Drive

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

04142008 Chg-P CR2E034 (12/06)

City & State
Falls Church, VA

City & State

4. FEI Number
54-1878009

Applied For
Not Applicable

Zip
22042

Country

Zip

Country

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324**

Name

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

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **P** ☐ Delete
NAME **HENRY, RAYMOND E**
STREET ADDRESS **2100 EAST GRAND AVE**
CITY-ST-ZIP **EL SEGUNDO, CA 90245**

TITLE ☒ Change ☐ Addition
NAME **Raymond E. Henry**
STREET ADDRESS **3170 Fairview Park Drive**
CITY-ST-ZIP **Falls Church, VA 22042**

TITLE **VP** ☒ Delete
NAME **KEANE, MICHAEL W**
STREET ADDRESS **2100 E GRAND AVE**
CITY-ST-ZIP **EL SEGUNDO, CA 90245**

TITLE **VPAT** ☒ Change ☐ Addition
NAME **Donald G. DeBuck**
STREET ADDRESS **3170 Fairview Park Drive**
CITY-ST-ZIP **Falls Church, VA 22042**

TITLE **VPS** ☒ Delete
NAME **FISK, HAYWARD D**
STREET ADDRESS **2100 EAST GRAND AVE**
CITY-ST-ZIP **EL SEGUNDO, CA 90245**

TITLE **VPS** ☐ Change ☒ Addition
NAME **William L. Deckelman**
STREET ADDRESS **3170 Fairview Park Drive**
CITY-ST-ZIP **Falls Church, VA 22042**

TITLE **AT** ☒ Delete
NAME **FLYNN, TIMOTHY R**
STREET ADDRESS **2100 E GRAN AVE**
CITY-ST-ZIP **EL SEGUNDO, CA 90245**

TITLE **AT** ☒ Change ☐ Addition
NAME **Bryan Brady**
STREET ADDRESS **2100 East Grand Avenue**
CITY-ST-ZIP **El Segundo, CA 90245**

TITLE **AT** ☐ Delete
NAME **IRVIN, THOMAS**
STREET ADDRESS **2100 EAST GRAND AVENUE**
CITY-ST-ZIP **EL SEGUNDO, CA 90245**

TITLE **T** ☒ Change ☐ Addition
NAME **Thomas R. Irvin**
STREET ADDRESS **3170 Fairview Park Drive**
CITY-ST-ZIP **Falls Church, VA 22042**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Bryan Brady

Bryan Brady

4/21/08

310.615.0311

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #