

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F04000004126

Entity Name: FADEA, INC.

**FILED**  
**Jan 10, 2011**  
**Secretary of State**

## **Current Principal Place of Business:**

300 WEST TUSCARAWAS ST.  
SUITE 720  
CANTON, OH 44702

## **New Principal Place of Business:**

5390 FOXCHASE AVE., N.W.  
CANTON, OH 44718

## **Current Mailing Address:**

300 WEST TUSCARAWAS ST.  
SUITE 720  
CANTON, OH 44702

## **New Mailing Address:**

P.O. BOX 36699  
CANTON, OH 44735

FEI Number: 20-1321909

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## **Name and Address of Current Registered Agent:**

PLUMB, FRANK  
1933 WEST BRANDON BLVD.  
BRANDON, FL 33511 US

## **Name and Address of New Registered Agent:**

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

## **OFFICERS AND DIRECTORS:**

Title: PCT  
Name: PLUMB, FRANK  
Address: 1933 WEST BRANDON BLVD.  
City-St-Zip: BRANDON, FL 33511

Title: VCS  
Name: THOMSON, DAVID  
Address: 5390 FOXCHASE AVE., N.W.  
City-St-Zip: CANTON, OH 44718

I hereby 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 all other like empowered.

SIGNATURE: DAVID C. THOMSON

VCS

01/10/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date