

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000005729

FILED
Jan 12, 2006
Secretary of State

Entity Name: ADAMS RESPIRATORY THERAPEUTICS, INC.

Current Principal Place of Business:

COLONIAL COURT
425 MAIN STREET
CHESTER, NJ 07930

New Principal Place of Business:

Current Mailing Address:

COLONIAL COURT
425 MAIN STREET
CHESTER, NJ 07930

New Mailing Address:

FEI Number: 75-2725552

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PCEO () Delete
Name: VALENTINO, MICHAEL J
Address: 425 MAIN STREET, COLONIAL COURT
City-St-Zip: CHESTER, NJ 07930

Title: VCEO () Delete
Name: ALBRECHT, HELMUT
Address: 425 MAIN STREET, COLONIAL COURT
City-St-Zip: CHESTER, NJ 07930

Title: VCFO () Delete
Name: BECKER, DAVID
Address: 425 MAIN STREET, COLONIAL COURT
City-St-Zip: CHESTER, NJ 07930

Title: V () Delete
Name: CASALE, ROBERT
Address: 425 MAIN STREET, COLONIAL COURT
City-St-Zip: CHESTER, NJ 07930

Title: VS () Delete
Name: RIEHEMANN, WALTER E
Address: 425 MAIN STREET, COLONIAL COURT
City-St-Zip: CHESTER, NJ 07930

Title: V () Delete
Name: IHIEVON, JOHN S
Address: 425 MAIN STREET, COLONIAL COURT
City-St-Zip: CHESTER, NJ 07930

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: V (X) Change () Addition
Name: THIEVON, JOHN S
Address: 14841 SOVEREIGN ROAD
City-St-Zip: FORT WORTH, TX 76155

I hereby certify that the information supplied with this filing does not qualify for the 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: BRAD COLE

AS

01/12/2006

Electronic Signature of Signing Officer or Director

_____ Date