2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000006652

Entity Name: ADCHEMY, INC

FILED Jul 08, 2008 Secretary of State

,	iidi Abone	W11, 1110.					
Current Principal Place of Business:				New Principal Place of Business:			
203 REDWOOD SHORES PARKWAY SUITE 125 REDWOOD CITY, CA 94065				101 REDWOOD SHORES PARKWAY SUITE 300 REDWOOD CITY, CA 94065			
Current Mailing Address: 203 REDWOOD SHORES PARKWAY SUITE 125 REDWOOD CITY, CA 94065				New Mailing Address:			
				101 REDWOOD SHORES PARKWAY SUITE 300 REDWOOD CITY, CA 94065			
FEI Number:	20-1969166	FEI Number Applied For ()	FEI Nur	nber Not Appl	icable ()	Certificate of Status Desired ()	
Name and	Address of	Current Registered Agent:		Name and	Address of	New Registered Agent:	
1200 SOU PLANTATI	ORATION S' TH PINE ISLA ON, FL 3332	AND ROAD 4 US					
	named entity of Florida.	submits this statement for the p	ourpose o	t changing i	ts registered	l office or registered agent, or botl	
SIGNATUF							
	Electro	nic Signature of Registered Age	ent			Date	
Election Can	npaign Financi	ng Trust Fund Contribution ().					
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTO			
Title: Name: Address: City-St-Zip:	NUKALA, MUF 203 REDWO) Delete RTHY C DD SHORES PARKWAY #125 ITY, CA 94065		Title: Name: Address: City-St-Zip:	NUKALA, MU 101 REDWO	(X) Change()Addition IRTHY C IOD SHORES PARKWAY #300 CITY, CA 94065	
Title: Name: Address: City-St-Zip:	THI THUMASA 203 REDWOO) Delete ITHIT, VEERAVICH DD SHORES PARKWAY #125 ITY, CA 94065		Title: Name: Address: City-St-Zip:	LINDERMAN 101 REDWO	(X) Change()Addition , ROBERT OD SHORES PARKWAY #300 CITY, CA 94065	
Title: Name: Address: City-St-Zip:				Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:				Title: Name: Address: City-St-Zip:	ss:		
Title: Name: Address: City-St-Zip:	() Delete		Title: Name: Address: City-St-Zip:	SETH, RAHO 101 REDWO	() Change (X) Addition OUL OOD SHORES PARKWAY #300 CITY, CA 94065	

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: ROBERT LINDERMAN SECY 07/08/2008