## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F07000004627

Entity Name: ADUDDELL INDUSTRIES, INC.

FILED Jul 16, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1601 N.W. EXPRESSWAY

SUITE 1500

OKLAHOMA CITY, OK 73113

OKLAHOMA CITY, OK 73118

New Mailing Address:

PO BOX 890550 OKLAHOMA CITY, OK 73189

**Current Mailing Address:** 

FEI Number: 73-1587867 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

NRAI SERVICES, INC. 2731 EXECUTIVE PARK DRIVE SUITE 4 WESTON, FL 33331 US

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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CP ( ) Delete Title: CP (X) Change ( ) Addition

Name: ADUDDELL, TIM Name: ADUDDELL, TIM

Address: 1601 N.W. EXPRESSWAY, SUITE 1500 Address: 14220 S. MERIDIAN AVENUE City-St-Zip: OKLAHOMA CITY, OK 73118 City-St-Zip: OKLAHOMA CITY, OK 73173

Title: S ( ) Delete Title: S (X) Change ( ) Addition

Name: WOODARD, FALBA Name: WOODARD, FALBA

 Address:
 1601 N.W. EXPRESSWAY, SUITE 1500
 Address:
 14220 S. MERIDIAN AVENUE

 City-St-Zip:
 OKLAHOMA CITY, OK 73118
 City-St-Zip:
 OKLAHOMA CITY, OK 73173

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: FALBA WOODARD S 07/16/2008