

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 25, 2008 08:00 AM
Secretary of State

DOCUMENT # F50290

1. Entity Name
ADEPTUS INDUSTRIES, INC.



Principal Place of Business
6224 17TH ST. E.
BRADENTON, FL 34203 US

Mailing Address
29
P.O. BOX 1103
TALLEVAST, FL 34270 US



01122008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-2141359

Applied For
Not Applicable

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

8. Name and Address of Current Registered Agent

WOOLLEY DEBRA A
6224 17TH ST E
BRADENTON, FL 34203

**DO NOT WRITE
IN THIS SPACE**

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 reissuing)

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**

U000000837320

03/04/08-20051-016 158.75

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD FRALEY, RICHARD A 6224 17TH ST E BRADENTON, FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VT FRALEY, KENNETH L 6224 17TH ST E BRADENTON, FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VS FRALEY, PATRICK K 6224 17TH ST. E. BRADENTON, FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

**DO NOT WRITE
IN THIS SPACE**

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-22-08

Date

941-756-7636

Daytime Phone #