

**FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Aug 17, 2007 8:00 am**  
**Secretary of State**

08-17-2007 90097 001 \*\*\*\*50.00

<b>DOCUMENT #</b> L06000100551	
<b>1. Entity Name</b>	
ADMIL LLC	

**DO NOT WRITE IN THIS SPACE**

<b>2. Principal Place of Business</b> 10480 SE 101ST AVE RD		<b>3. Mailing Address</b> <i>Note changed!</i> PO BOX 2021	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
<b>City &amp; State</b> BELLEVIEW, FL		<b>City &amp; State</b> LADY LAKE FL	
<b>Zip</b> 34420	<b>Country</b>	<b>Zip</b> 33158	<b>Country</b>

**DO NOT WRITE IN THIS SPACE**

<b>4. FEI Number</b> 03-0608367	<b>Applied For</b> <input checked="" type="checkbox"/> Not Applicable
<b>5. Certificate of Status Desired</b> <input type="checkbox"/> \$8.75 Additional Fee Required	

**DO NOT WRITE  
IN THIS SPACE**

<b>7. Name and Address of Current Registered Agent</b>	
<b>Name</b> REBECCA K KORVER	
<b>Street Address (P.O. Box Number is Not Acceptable)</b> 10480 SE 101ST AVE RD	
<b>City</b> BELLEVIEW	<b>FL</b> <b>Zip Code</b> 34420

**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 reinstating) DATE

**January 1 - May 1 Fee is \$150.00**  
**After May 1, Fee is \$550.00**  
**Amended UBR is \$61.25**  
**Make Check Payable to Florida Department of State**

**9. Election Campaign Financing** ☐ \$5.00 May Be Added to Fees  
Trust Fund Contribution.

**10. OFFICERS AND DIRECTORS**

**11.**

<b>TITLE</b> NAME <b>STREET ADDRESS</b> <b>CITY-ST-ZIP</b>	MANAGING MEMBER REBECCA K KORVER 10480 SE 101ST AVE RD BELLEVIEW, FL 34420	<b>TITLE</b> NAME <b>STREET ADDRESS</b> <b>CITY-ST-ZIP</b>	Managing Member Rebecca K Korver PA Same
<b>TITLE</b> NAME <b>STREET ADDRESS</b> <b>CITY-ST-ZIP</b>	ROBERT W KEDDIE 3019 SE 7TH AVE BOX C OCALA FL 34470	<b>TITLE</b> NAME <b>STREET ADDRESS</b> <b>CITY-ST-ZIP</b>	Managing Member Exodus II Inc 3012 E Silver Springs Blvd PMB 87 OCALA FL 34470
<b>TITLE</b> NAME <b>STREET ADDRESS</b> <b>CITY-ST-ZIP</b>		<b>TITLE</b> NAME <b>STREET ADDRESS</b> <b>CITY-ST-ZIP</b>	
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**12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 on an attachment with an address, with all other like empowered.**

**SIGNATURE:** *Rebecca Kay Korver PA.*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

*Aug 8 07*

Date Daytime Phone #

# ATTACHMENT

Dyess, Jones & Associates LLC CPAs  
A CERTIFIED PUBLIC ACCOUNTING FIRM

60054892  
#L06000100551

August 8, 2007

Division of Corporations  
Annual Reports Section  
P.O. Box 6850  
Tallahassee, FL 32314

re: 2007 UBR for ADMIL LLC EIN 03-0608367

To Whom It May Concern:

Enclosed is the 2007 UBR report for our client listed above. It has just come to our client's attention that they have not filed their annual report for this year. Our client states they never received your notification card mailed in January.

Our client would have paid the fee when due if given sufficient notice. Due to the fact they did not receive the notice you sent in January, it would be appreciated if you would waive the penalty and accept the \$50 payment sent with this report as payment in full.

If you should have any questions regarding this matter, please contact this office at the address above.

Sincerely,

DYESS, JONES, AND ASSOICATES LLC  
CERTIFIED PUBLIC ACCOUNTING FIRM



Dory Dyess, CPA