

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 19, 2003 8:00 am
Secretary of State

02-19-2003 90026 028 ***158.75

0381399 AV

DOCUMENT # **L23315**

1. Entity Name
ADAMS FLORIDA STATE INSURANCE, INC.



Principal Place of Business
**%CARL R. ADAMS, JR.
2065 RADNOR CT.
NORTH PALM BEACH FL 33408**

Mailing Address
**%CARL R. ADAMS, JR.
2065 RADNOR CT.
NORTH PALM BEACH FL 33408**



2. Principal Place of Business

CARL R ADAMS JR

3. Mailing Address

CARL R ADAMS JR

Suite, Apt. #, etc.

13176 107TH ST

Suite, Apt. #, etc.

13176 107TH ST

City & State

FELLSMERE, FL

City & State

FELLSMERE FL

4. FEI Number **65-0150826**

Applied For

Not Applicable

Zip **32948**

Country

INDIAN RIVER

Zip **32948**

Country

INDIAN RIVER

5. Certificate of Status Desired



\$8.75 Additional Fee Required

CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

**ADAMS, CARL R JR
2065 RADNOR CT.
NORTH PALM BEACH FL 33408**

7. Name and Address of New Registered Agent

Name **CARL R ADAMS JR**
Street Address (P.O. Box Number is Not Acceptable)
13176 107TH ST
City **FELLSMERE FL** Zip Code **32948**

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 *Carl R Adams Jr* **CARL R ADAMS JR** OWNER 2-15-03
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2003 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Delete
P	ADAMS, CARL R JR	2065 RADNOR COURT	N PALM BEACH FL	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Change	Addition
	CARL R ADAMS JR	13176 107TH ST	FELLSMERE, FL, 32948	<input checked="" type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

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 Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Carl R Adams Jr* **CARL R ADAMS JR** OWNER 2/15/03 771-571-2785
Signature, typed or printed name of signing officer or director Date Daytime Phone #

CR2E034 (10/02)