

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L85287

Entity Name: ADMIN. 2000, INC.

FILED
Apr 20, 2009
Secretary of State

Current Principal Place of Business:

780 DELTONA BLVD, STE 201
DELTONA, FL 32776 US

New Principal Place of Business:

Current Mailing Address:

780 DELTONA BLVD, STE 201
DELTONA, FL 32776 US

New Mailing Address:

FEI Number: 59-3016199

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NAULT, JOSEPH A.
34942 NASHUA BLVD
SORRENTO, FL 32776 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: NAULT, JOSEPH A
Address: 34942 NASHUA BLVD
City-St-Zip: SORRENTO, FL 32776

Title: V () Delete
Name: NAULT, SHARON A
Address: 34942 NASHUA BLVD
City-St-Zip: SORRENTO, FL 32776

Title: D () Delete
Name: ANDERSON, WILLIAM A
Address: 6781 E CATERPILLAR TRAIL
City-St-Zip: SOUTH RANGE, WI 34874

Title: D () Delete
Name: SCHNETZER, DEBORAH
Address: 5598 BUNKY WAY
City-St-Zip: DUNWOODY, GA 30338

Title: D () Delete
Name: NAULT, MARC
Address: 1561 ROYAL FERN :AME
City-St-Zip: ORANGE PARK, FL 32003

Title: D () Delete
Name: TILLS, JAMES J
Address: 91 WENTWOOD DRIVE
City-St-Zip: DEBARY, FL 32713

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: NAULT, MARC
Address: 1518 WILD IRIS LANE
City-St-Zip: ORANGE PARK, FL 32003

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: JOSEPH A NAULT

PRES

04/20/2009

Electronic Signature of Signing Officer or Director

Date