

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N96000004820

1. Entity Name

ADJUTANT INTERNATIONAL DEVELOPMENT (AID), INC.

FILED
Jan 13, 2000 8:00 am
Secretary of State

01-13-2000 90001 004 ****70.00

Principal Place of Business 236 3RD ST N NAPLES FL 34102 27951 NCW YORK ST #11 BONITA SPRINGS, FL 34135	Mailing Address P O BOX 2741 NAPLES FL 34106-2741
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2. Principal Place of Business 27951 NCW YORK ST Suite, Apt. #, etc. 11	3. Mailing Address Suite, Apt. #, etc.
City & State BONITA SPRINGS FL	City & State
Zip 34135	Country



DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3468726	Applied For Not Applicable
5. Certificate of Status Desired X	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent MITCHELL, DAVID J 236 3RD STREET N. NAPLES FL 34102	7. Name and Address of New Registered Agent Name DAVID J. MITCHELL Street Address (P.O. Box Number is Not Acceptable) 27951 NCW YORK ST #11 City BONITA SPRINGS FL Zip Code 34135
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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.

SIGNATURE:

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS \$61.25	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees	Make Check Payable to Department of State
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TP MITCHELL, DAVID J 236 3RD STREET N. NAPLES FL 34102 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	SENIOR DIRECTOR OF OPERATIONS RICHARD G. NOBLE 27951 NCW YORK ST. #11 BONITA SPRINGS FL 34135 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TVP MASCO, FRED 4838 TAHITI LANE NAPLES FL 43112 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST GALVIN, DANIEL 211 3RD STREET N.W. NAPLES FL 34120 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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 617, 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

Date Daytime Phone #

CR2E037 (9/99)