2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 21, 2010
Secretary of State

DOCUMENT# N98000002794

Entity Name: EMPLOYMENT OF ADULTS WITH DISABILITIES, INC.

Current Principal Place of Business:

6103 UMBRELLA TREE LN
FORT LAUDERDALE, FL 33319

New Principal Place of Business:

6103 UMBRELLA TREE LN
TAMARAC, FL 33319

Current Mailing Address:

6103 UMBRELLA TREE LN
FORT LAUDERDALE, FL 33319

New Mailing Address:

6103 UMBRELLA TREE LN
TAMARAC, FL 33319

FEI Number: 65-0866440 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

NORKUNAS, WILLIAM
6103 UMBRELLA TREE LANE
TAMARAC, FL 33319 US

Name and Address of New Registered Agent:

NORKUNAS, WILLIAM J
6103 UMBRELLA TREE LANE
TAMARAC, FL 33319 US

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: WILLIAM J. NORKUNAS 02/21/2010
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PD
Name: NORKUNAS, WILLIAM J
Address: 6103 UMBRELLA TREE LANE
City-St-Zip: TAMARAC, FL 33319

I hereby 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: WILLIAM J. NORKUNAS PRES 02/21/2010
Electronic Signature of Signing Officer or Director Date