

**2005 NOT-FOR-PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Jan 31, 2005 8:00 am**  
**Secretary of State**

01-31-2005 90054 008 \*\*\*\*70.00

DOCUMENT # N99000006295

1. Entity Name  
CHRISTIAN ANTI-DEFAMATION LEAGUE ("CADL"), INC.



Principal Place of Business

P.O. BOX 4  
PALM HARBOR, FL 34683-2  
**34683**

Mailing Address

P.O. BOX 4  
PALM HARBOR, FL 34683-2  
**34683**

40008843



01192005 No Chg-NP

CR2E037 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number

65-0962138

Applied For

Not Applicable

5. Certificate of Status Desired



**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

HOLLIS, W.S.  
1482 WILLOW BROOK DRIVE  
PALM HARBOR, FL 34683

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IN THIS SPACE**

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

*W.S. Hollis* W.S. Hollis

23 Jan 05

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25  
Due by May 1, 2005**

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  
TD  
HOLLIS, W.S.  
1482 WILLOW BROOK DRIVE  
PALM HARBOR, FL 34683

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
TD  
BEASLEY, JAMES G COL.  
1613 FOREST RIDGE ROAD  
BIRMINGHAM, AL 35226

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
TD  
FOLLUO, CHARLES COL.  
614 ERMAN  
BURKE, VA 22015

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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IN THIS SPACE**

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:

*W.S. Hollis* W.S. Hollis

23 Jan 05

(727) 771-0635

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #