

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000000135

FILED
Apr 09, 2005
Secretary of State

Entity Name: ADL WELLNESS AND HERBS N' MORE, INC.

Current Principal Place of Business:

4353 EDGEWATER DRIVE, #3
ORLANDO, FL 32804

New Principal Place of Business:

Current Mailing Address:

4353 EDGEWATER DRIVE, #3
ORLANDO, FL 32804

New Mailing Address:

FEI Number: 75-2984161

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FERRANTE, THOMAS A
1759 FAIRVIEW SHORES DRIVE
ORLANDO, FL 32804 US

Name and Address of New Registered Agent:

FERRANTE, THOMAS A
5021 MAUI CIRCLE
ORLANDO, FL 32808 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:

04/09/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: FERRANTE, THOMAS A
Address: 1759 FAIRVIEW SHORES DRIVE
City-St-Zip: ORLANDO, FL 32804

Title: D () Delete
Name: FERRANTE, KATHRYN
Address: 1759 FAIRVIEW SHORES DRIVE
City-St-Zip: ORLANDO, FL 32804

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: FERRANTE, THOMAS A
Address: 5021 MAUI CIRCLE
City-St-Zip: ORLANDO, FL 32808

Title: D (X) Change () Addition
Name: FERRANTE, KATHRYN
Address: 5021 MAUI CIRCLE
City-St-Zip: ORLANDO, FL 32808

I hereby certify that the information supplied with this filing does not qualify for the 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 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: KATHRYN FERRANTE

PRES

04/09/2005

Electronic Signature of Signing Officer or Director

Date