

# **2007 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P02000001390

**Entity Name:** ADL INSURANCE WHOLESALERS, INC.

**FILED**  
**Nov 28, 2007**  
**Secretary of State**

**Current Principal Place of Business:**

PO BOX 880  
SORRENTO, FL 32776

**New Principal Place of Business:**

2485 W. MOONLIGHT LANE  
EUSTIS, FL 32726 US

**Current Mailing Address:**

3411 N HIGHWAY 19A  
MOUNT DORA, FL 32757

**New Mailing Address:**

P.O. BOX 880  
SORRENTO, FL 32776

**FEI Number:** 30-0014084

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

EDWARD P. JORDAN II, P.A.  
604 NORTH HIGHWAY 27  
MINNEOLA, FL 34715 US

**Name and Address of New Registered Agent:**

CHAK, WILLIAM W  
2485 W. MOONLIGHT LANE  
EUSTIS, FL 32726 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 CHAK

11/28/2007

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: CHAK, WILLIAM W  
Address: P.O. BOX 880  
City-St-Zip: SORRENTO, FL 32776

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: MR (X) Change ( ) Addition  
Name: CHAK, WILLIAM W  
Address: P.O. BOX 880  
City-St-Zip: SORRENTO, FL 32776

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: WILLIAM CHAK

MR

11/28/2007

Electronic Signature of Signing Officer or Director

Date