

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000121554

Entity Name: ALL DEBRIS, INC.

FILED  
Feb 24, 2006  
Secretary of State

## Current Principal Place of Business:

7300 CRILL AVENUE BOX 65  
PALATKA, FL 32177

## New Principal Place of Business:

## Current Mailing Address:

7300 CRILL AVENUE BOX 65  
PALATKA, FL 32177

## New Mailing Address:

FEI Number: 47-0898861

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

HERRINGTON, ADAM  
7300 CRILL AVENUE BOX 65  
PALATKA, FL 32177 US

## Name and Address of New Registered Agent:

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: HERRINGTON, ADAM  
Address: 258 EAST END ROAD  
City-St-Zip: SAN MATEO, FL 32187

Title: V ( ) Delete  
Name: HERRINGTON, WILLIAM J  
Address: 7324 CRILL AVENUE  
City-St-Zip: PALATKA, FL 32177

Title: ST ( ) Delete  
Name: HERRINGTON, TARA  
Address: 258 EAST END ROAD  
City-St-Zip: SAN MATEO, FL 32187

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: HERRINGTON, ADAM  
Address: 270 EAST END ROAD  
City-St-Zip: SAN MATEO, FL 32187

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ST (X) Change ( ) Addition  
Name: HERRINGTON, TARA  
Address: 270 EAST END ROAD  
City-St-Zip: SAN MATEO, FL 32187

I hereby certify that the information supplied with this filing does not qualify for the 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: ADAM HERRINGTON

P

02/24/2006

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date