

2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT # P02000121554

1. Entity Name
ALL DEBRIS, INC.



Principal Place of Business
7300 CRILL AVENUE BOX 65
PALATKA, FL 32177

Mailing Address
7300 CRILL AVENUE BOX 65
PALATKA, FL 32177

FILED

06 APR 11 AM 9:23

STATE OF FLORIDA
TALLAHASSEE, FLORIDA



04042006 Chg-P CR2E034 (11/05)

4. FEI Number
47-0898861

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

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

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Adam Herrington Adam Herrington President

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

(NOTE: Registered Agent signature required when reinstating)

4-4-06

DATE

Amended AR is \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE P
NAME HERRINGTON, ADAM ☐ Delete
STREET ADDRESS 270 EAST END ROAD
CITY-ST-ZIP SAN MATEO, FL 32187

TITLE V
NAME HERRINGTON, WILLIAM J ☐ Delete
STREET ADDRESS 7324 CRILL AVENUE
CITY-ST-ZIP PALATKA, FL 32177

TITLE ST
NAME HERRINGTON, TARA ☐ Delete
STREET ADDRESS 270 EAST END ROAD
CITY-ST-ZIP SAN MATEO, FL 32187

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS 400070477374
CITY-ST-ZIP 04/14/06--01074--008 **\$61.25

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE DIRECTOR ☐ Change ☒ Addition
NAME John Jackson Tilton III
STREET ADDRESS 128 Tilton Dr
CITY-ST-ZIP San Mateo, FL 32187

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Adam Herrington Adam Herrington
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/4/06

Date

386-328-9898

Daytime Phone #