

# 2013 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P03000068616

**FILED**  
**Feb 15, 2013**  
**Secretary of State**

**Entity Name:** ADAMS FINANCIAL SERVICES, P.A.

**Current Principal Place of Business:**

150 N. SYKES CREEK PKWY  
SUITE 100  
MERRITT ISLAND, FL 32953 US

**New Principal Place of Business:**

319 RIVEREDGE BLVD.  
UNIT 218  
COCOA, FL 32922 US

**Current Mailing Address:**

150 N. SYKES CREEK PKWY  
SUITE 100  
MERRITT ISLAND, FL 32953 US

**New Mailing Address:**

319 RIVEREDGE BLVD.  
UNIT 218  
COCOA, FL 32922 US

**FEI Number:** 14-1887993

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

WEEKS, WARREN W  
150 N. SYKES CREEK PKWY  
SUITE 100  
MERRITT ISLAND, FL 32953 US

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

WEEKS, WARREN W  
319 RIVEREDGE BLVD.  
UNIT 218  
COCOA, FL 32922 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: WARREN W. WEEKS

02/15/2013

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PRES  
Name: WEEKS, WARREN W  
Address: 319 RIVEREDGE BLVD.  
City-St-Zip: COCOA, FL 32922 US

Title: SEC  
Name: WEEKS, DEBORAH H  
Address: 319 RIVEREDGE BLVD.  
City-St-Zip: COCOA, FL 32922 US

I hereby 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 all other like empowered.

SIGNATURE: WARREN W WEEKS

PRES

02/15/2013

Electronic Signature of Signing Officer or Director

Date