

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000133531

FILED
Apr 30, 2009
Secretary of State

Entity Name: ADE SERVICES, INC.

Current Principal Place of Business:

2811 4TH ST. SW
LEHIGH ACRES, FL 33976

New Principal Place of Business:

1402 JEFFERSON AVE
LEHIGH ACRES, FL 33972

Current Mailing Address:

2811 4TH ST. SW
LEHIGH ACRES, FL 33976

New Mailing Address:

1402 JEFFERSON AVE
LEHIGH ACRES, FL 33972

FEI Number: 30-0216053

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PHILLIPS, JOHN W PRESIDE
2811 4TH ST. SW
LEHIGH ACRES, FL 33976 US

Name and Address of New Registered Agent:

PHILLIPS, JOHN W PRESIDE
1402 JEFFERSON AVE
LEHIGH ACRES, FL 33972 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: JOHN W. PHILLIPS

04/30/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: PHILLIPS, JOHN W
Address: 2811 4TH ST. SW
City-St-Zip: LEHIGH ACRES, FL 33976

Title: STD () Delete
Name: PHILLIPS, CAROL M
Address: 2811 4TH ST. SW
City-St-Zip: LEHIGH ACRES, FL 33976

Title: D () Delete
Name: RICH, WILLIAM
Address: 1210 EDWARD AVE.
City-St-Zip: LEHIGH ACRES, FL 33972

Title: D () Delete
Name: RICH, GREG
Address: 1210 EDWARD AVE
City-St-Zip: LEHIGH ACRES, FL 33972

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: PHILLIPS, JOHN W
Address: 1402 JEFFERSON AVE
City-St-Zip: LEHIGH ACRES, FL 33972

Title: STD (X) Change () Addition
Name: PHILLIPS, CAROL M
Address: 1402 JEFFERSON AVE
City-St-Zip: LEHIGH ACRES, FL 33972

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

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

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: JOHN W. PHILLIPS

PD

04/30/2009

Electronic Signature of Signing Officer or Director

Date