


**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jun 08, 2007 8:00 am
Secretary of State

06-08-2007 90001 004 ***158.75

DOCUMENT # PO5000123092	
1. Entity Name CADEV, INC	

Principal Place of Business 150A SPRING GATE DRIVE #308 PANAMA CITY, FL 32404	Mailing Address 150A SPRING GATE DRIVE #308 PANAMA CITY, FL 32404
---	---

DO NOT WRITE IN THIS SPACE

40120166

No Chg-P CR2E034 (11/05)

4. FEI Number 17-1227552	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

**CORPORATION SERVICE COMPANY
1201. HAYS STREET
TALLAHASSEE, FL 32301**

**DO NOT WRITE
IN THIS SPACE**

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

9. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	TREASURER & PRESIDENT. DIRECTOR CLIVE A. PITCHER 150A SPRING GATE DRIVE #308 PANAMA CITY FL 32404
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

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: *Clive A. Pitcher* **CLIVE A. PITCHER** **6.A.07** **850-871-4767**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR (TREASURER & PRESIDENT) Date Daytime Phone #