

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000152888

Entity Name: ADAMS RECOVERY INC.

FILED  
Sep 21, 2009  
Secretary of State

## Current Principal Place of Business:

1128 SW 4 AVE  
POMPANO BEACH, FL 33060

## New Principal Place of Business:

4201 KEAN RD.  
DAVIE, FL 33314

## Current Mailing Address:

1128 SW 4 AVE  
POMPANO BEACH, FL 33060

## New Mailing Address:

P.O. BOX 291435  
DAVIE, FL 33329

FEI Number: 22-3918383

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

ADAMS, DANIEL T  
1128 SW 4 AVE  
POMPANO BEACH, FL 33060 US

## Name and Address of New Registered Agent:

HOFFER, PAUL  
15026 SW 13TH PL.  
SUNRISE, FL 33326 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: PAUL HOFFER

09/21/2009

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: ADAMS, DANIEL T  
Address: 1128 SW 4 AVE  
City-St-Zip: POMPAN0 BEACH, FL 33060

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: HOFFER, WILLIAM  
Address: 3810 SW 53RD ST  
City-St-Zip: FT LAUDERDALE, FL 33312

Title: VP ( ) Change (X) Addition  
Name: HOFFER, PAUL  
Address: 15026 SW 13 PL  
City-St-Zip: SUNRISE, FL 33326

Title: S/T ( ) Change (X) Addition  
Name: EPEL, BARBARA  
Address: 3810 SW 53RD ST  
City-St-Zip: FT LAUDERDALE, FL 33326

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: PAUL HOFFER

VP

09/21/2009

Electronic Signature of Signing Officer or Director

Date