

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000157000

Entity Name: ADP SURFACES, INC.

FILED
Apr 29, 2009
Secretary of State

Current Principal Place of Business:

841 DRIVE BUICK AVENUE
ORLANDO, FL 32808

New Principal Place of Business:

Current Mailing Address:

841 DRIVE BUICK AVENUE
ORLANDO, FL 32808

New Mailing Address:

FEI Number: 20-3864919

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WINGFIELD, SIOBHAN M ESQ.
1021 E. HARWOOD STREET
ORLANDO, FL 32803 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: FULP, KEVIN
Address: 661 LONGMEADOW CIRCLE
City-St-Zip: LONGWOOD, FL 32779

Title: D () Delete
Name: PIZAM, HAIM CY
Address: 1021 EAST HARWOOD STREET
City-St-Zip: ORLANDO, FL 32803

Title: D () Delete
Name: PIZAM, ESTHER
Address: 170 NOTTOWAY TRAIL
City-St-Zip: MAITLAND, FL 32751

Title: D () Delete
Name: BLAKE, BRETT J
Address: 205 BARRY COURT
City-St-Zip: LONGWOOD, FL 32779

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: BRETT BLAKE

D

04/29/2009

Electronic Signature of Signing Officer or Director

_____ Date