2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 27, 2002 8:00 am
Secretary of State
03-27-2002 90079 020 ***150.00

DOCUMENT # P39521

1. Entity Name
AD-LIT INC.

Principal Place of Business	Mailing Address
2890 PALM BEACH BLVD FORT MYERS FL 33916-1503 US	2890 PALM BEACH BLVD FORT MYERS FL 33916-1503 US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
2890 Palm Beach Blvd	2890 Palm Beach Blvd
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Fort Myers, FL	City & State: Fort Myers, FL
Zip: 33916-1503 Country: USA	Zip: 33916-1503 Country: USA

4. FEI Number 39-1218492 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
GUSSEL, J. THOMAS 2890 PALM BEACH BLVD FORT MYERS FL 33916-1503	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

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.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS $150.00
After May 1, 2002 Fee will be $550.00
Make Check Payable to Department of State

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

11. OFFICERS AND DIRECTORS			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PT GUSSEL, J. THOMAS 2890 PALM BEACH BLVD FORT MYERS FL 33916-1503	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	President & Treasurer Gussel, J. Thomas 2890 Palm Beach Blvd Fort Myers, FL 33916-1503	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S DIXON, JOAN C PO BOX 27 WISCONSIN DELLS WI 53965	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Secretary Dixon, Joan C PO Box 27 Wisconsin Dells, WI 53965	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V GUSSEL, LISA M 2890 PALM BEACH BLVD FORT MYERS FL 33916	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Vice-President Gussel, Lisa M 2890 Palm Beach Blvd Fort Myers, FL 33916	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E034 (9/01)

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Joan C Dixon Secretary 3-8-02 608/254-8770
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #