

2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P93000016984

Entity Name: AD FORCE, INC.

FILED
Dec 11, 2009
Secretary of State**Current Principal Place of Business:**3440 RENAISSANCE BLVD.
SUITE 1
BONITA SPRINGS, FL 34134 US**New Principal Place of Business:****Current Mailing Address:**3440 RENAISSANCE BLVD.
SUITE 1
BONITA SPRINGS, FL 34134 US**New Mailing Address:**

FEI Number: 65-0413666

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:BAVIELLO, MICHAEL A JR.
800 SEAGATE DRIVE
SUITE 204
NAPLES, FL 34103 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

OFFICERS AND DIRECTORS:Title: P/D () Delete
Name: SHALLIES, MARY
Address: 5730 WAXMYRTLE WAY
City-St-Zip: NAPLES, FL 34109Title: VP (X) Delete
Name: WILLIAM, OBERMAN
Address: 460 CORBEL DRIVE
City-St-Zip: NAPLES, FL 34110**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**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: MARY TYDINGS-SHALLIES

PRES

12/11/2009

Electronic Signature of Signing Officer or Director

Date