

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000056596

FILED  
Apr 09, 2007  
Secretary of State

**Entity Name:** CADE & ASSOCIATES ADVERTISING, INC.

**Current Principal Place of Business:**

1645 METROPOLITAN BLVD  
TALLAHASSEE, FL 32308 US

**New Principal Place of Business:**

**Current Mailing Address:**

1645 METROPOLITAN BLVD  
TALLAHASSEE, FL 32308 US

**New Mailing Address:**

**FEI Number:** 59-3192193

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

WATKINS, STEVE M III  
215 DELTA COURT  
TALLAHASSEE, FL 32303 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: P ( ) Delete  
Name: SHAPLEY, RICHARD P MR.  
Address: 478 FRANK SHAW RD.  
City-St-Zip: TALLAHASSEE, FL

Title: VS ( ) Delete  
Name: FRANDSEN, LAURA M MRS.  
Address: 3912 LEANE DR  
City-St-Zip: TALLAHASSEE, FL 32308

Title: VT ( ) Delete  
Name: CADE, JOHN P MR.  
Address: 3649 LETITIA LANE  
City-St-Zip: TALLAHASSEE, FL

**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:

I hereby certify that the information supplied with this filing does not qualify for the 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:** RICHARD SHAPLEY

PRES

04/09/2007

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date