2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000048124

Entity Name: ADELPHIA CARD & GIFT, INC.

FILED Mar 23, 2009 Secretary of State

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
	BEACH, FL 3				
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
	24TH STREET JSE POINT, FL				
FEI Number:	65-0512726	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	Address of C	urrent Registered Agent:	Name and Address	of New Registered Agent:	
LIGHTHOL	24TH STREET JSE POINT, FL	_ 33064 US	ourness of changing its registers	ad affice or registered agent or both	
in the State		submits this statement for the p	ourpose of changing its register	ed office or registered agent, or both,	
SIGNATUR	RE:				
	Electron	ic Signature of Registered Age	ent	Date	
Election Carr	npaign Financing	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	T () CHRISTOS, NIC 2640 NE 24TH S LIGHTHOUSE F	STREET	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	P () CHRISTOS, EL/ 2640 NE 24TH S LIGHTHOUSE P	STREET	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	S () CHRISTOS, HE 2640 NE 24TH S LIGHTHOUSE F	STREET	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	CHRISTOS, THO 2809 SW 14TH		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	CHRISTOS, CA 2209 CYPRESS	Delete THERINE A S BEND DRIVE S ACH, FL 33069	Title: Name: Address: City-St-Zip:	() Change () Addition	

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: NICK P. CHRISTOS TRES 03/23/2009