

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P95000093542 (5)**

1. Corporation Name
ADEX, INC.

Principal Place of Business

~~XXXXXX~~
~~XXXXXX~~
~~XXXXXX~~

Mailing Address

~~XXXXXX~~
~~XXXXXX~~
~~XXXXXX~~



2. Principal Place of Business

21 **935 Hillsboro Mile**
Suite, Apt. #, etc.

22 City & State

23 **Hillsboro Beach, Fl.**

24 Zip
33062

Country

2a. Mailing Address

26 **5425 Naiman Pkway**
Suite, Apt. #, etc.

27 City & State

28 **Solon, Ohio**

29 Zip
44139

Country

3. Date Incorporated or Qualified

12/08/1995

3a. Date of Last Report

4. FEI Number

65-0635895

Applied For

Not Applicable

5. Certificate of Status Desired

☐ **\$8.75 Additional Fee Required**

6. Election Campaign Financing
Trust Fund Contribution

☐ **\$5.00 May Be Added to Fees**

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301-2525**

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and the corporation

Signature, typed or printed name of registered agent and the corporation

DATE

12. OFFICERS AND DIRECTORS

TITLE **P** ☒ DELETE
NAME **JORDAN, E.E.**
STREET ADDRESS **650 SE 3RD AVE**
CITY-ST-ZIP **FT LAUDERDALE FL 33301**

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

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TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE **President** ☐ Change ☒ Addition

1.2 NAME **James B. Stinnett**

1.3 STREET ADDRESS **607 Berkshire Ct.**

1.4 CITY-ST-ZIP **Downers Grove, IL. 60516**

2.1 TITLE **Secretary/Treasurer** ☐ Change ☒ Addition

2.2 NAME **S. Sandy Satullo, II**

2.3 STREET ADDRESS **935 Hillsboro Mile**

2.4 CITY-ST-ZIP **Hillsboro Beach, Florida 33062**

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6/8/96

CR2E034 (12/95)