

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED

**Mar 12, 2007 08:00 AM
Secretary of State**

DOCUMENT # P97000019587

1. Entity Name
ADW BUSINESS COMMUNICATION, INC.



Principal Place of Business
**2623 TIMBERCREEK CIRCLE
BOCA RATON, FL 33431**

Mailing Address
**2623 TIMBERCREEK CIRCLE
BOCA RATON, FL 33431**



02242007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-0763363

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**ARMSTRONG, PATRICIA L
2623 TIMBERCREEK CIRCLE
BOCA RATON, FL 33431**

**DO NOT WRITE
IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE Patricia L. Armstrong President 3/6/07
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

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

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**P
ARMSTRONG, PATRICIA L.
2623 TIMBERCREEK CIRCLE
BOCA RATON, FL 33431**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VP
WRIGHT, LISA A.
17276 BOCA CLUB BLVD., #1801
BOCA RATON, FL 33487**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VP
DALLAS, R. IRENE
238 STEBBINS TERRACE S.E.
PORT CHARLOTTE, FL 33952**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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03/21/07-80041-003 150.00

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Patricia L. Armstrong Patricia L. Armstrong 3/6/07
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #