

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

0014265 AV

DOCUMENT # P97000093781

1. Entity Name

ADEPT SUPPORT COORDINATION, INC.



FILED

03 MAR 14 PM 2:27

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



☐ CHECK HERE IF MAKING CHANGES

03

Principal Place of Business

2701 S RIDGEWOOD AVE.

STE. E-3

SOUTH DAYTONA FL 32119

US

Mailing Address

2701 S RIDGEWOOD AVE.

STE. E-3

SOUTH DAYTONA FL 32119

US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

58-2356376

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CORPDIRECT AGENTS

103 NORTH MERIDIAN BLVD.

LOWER LEVEL

TALLAHASSEE FL 32301

Name

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

City

FL

Zip Code

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 _____ DATE _____

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, 2003 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE D ☐ Delete
NAME FROYMOVICH, PHILLIP
STREET ADDRESS 11579 SUTTON PLACE DRIVE
CITY-ST-ZIP CARMEL IN 46032

☐ Change ☐ Addition
400014907354
03/28/03--01042--008 **150.00

TITLE D ☐ Delete
NAME FROYMOVICH, ETELKA
STREET ADDRESS 11579 SUTTON PLACE DRIVE
CITY-ST-ZIP CARMEL IN 46032

☐ Change ☐ Addition

TITLE ED ☐ Delete
NAME TREMBLAY, DAGNE
STREET ADDRESS 2701 S RIDGEWOOD AVE., STE E-3
CITY-ST-ZIP SOUTH DAYTONA FL 32119

☐ Change ☐ Addition

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: *Dagne Tremblay*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Dagne Tremblay

2/10/03

386-761-5000

X18

CR2E034 (10/02)