

2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 25, 2005 8:00 am
Secretary of State

04-25-2005 90227 041 ***150.00

DOCUMENT # P99000017033

1. Entity Name

ADVANCED DATA MANAGEMENT TECHNOLOGIES, INC.

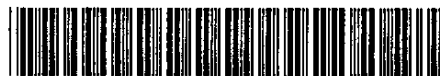


Principal Place of Business

3951 DEMERY DRIVE EAST
JACKSONVILLE FL 32250-1924

Mailing Address

PO BOX 551187
JACKSONVILLE FL 32255-1187



2. Principal Place of Business

136 JARDIN DE MER PL

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

JACKSONVILLE BEACH, FL

Suite, Apt. #, etc.

City & State

JACKSONVILLE BEACH, FL

City & State

Zip

32250

Country

US

Zip

Country

4. FEI Number

59-3575086

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

CAMPBELL, EDWARD J
3951 DEMERY DRIVE EAST
JACKSONVILLE FL 32250-1924

7. Name and Address of New Registered Agent

Name CAMPBELL, EDWARD J

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

136 JARDIN DE MER PL

City JACKSONVILLE

FL

Zip Code 32250

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

Edward J Campbell
Signature, typed or printed name of registered agent and title if applicable

EDWARD J CAMPBELL

(NOTE: Registered Agent signature required when reinstating)

4/19/05
DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2005 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

TITLE P
NAME CAMPBELL, EDWARD J
STREET ADDRESS 3951 DEMERY DRIVE EAST
CITY-ST-ZIP JACKSONVILLE BEACH FL 32250

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☒ Change ☐ Addition
136 JARDIN DE MER PL
JACKSONVILLE BEACH, FL 32250

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

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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:

Edward J Campbell
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

EDWARD J CAMPBELL

4/19/05 904-905-0328
Date Daytime Phone #