

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

FILED
Mar 13 1996 8:00 am
Secretary of State

DOCUMENT # S67780 (4)

1. Corporation Name

A.D.E. OF JACKSONVILLE, INC.



Principal Place of Business

1919 SOUTH POST RD.
INDIANAPOLIS IN 46239

Mailing Address

1919 SOUTH POST RD.
INDIANAPOLIS IN 46239

3. Date Incorporated or Qualified

07/18/1991

3a. Date of Last Report

06/15/1995

2. Principal Place of Business

2a. Mailing Address

21

Suite, Apt. #, etc.

26

Suite, Apt. #, etc.

22

City & State

27

City & State

23

Zip

Country

28

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CT CORPORATION SYSTEM
8751 W BROWARD BLVD.
PLANTATION FL 33324

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 date of filing

NOTE: Registered Agent signature required when reinstating

DATE

12. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

D
HOCKETT, D. MICHAEL
1919 S. POST RD.
INDIANAPOLIS IN
ST
WECHTER, LARRY
1919 S POST ROAD
INDIANAPOLIS IN
ATC
HOWELL, J MARK
1919 S POST ROAD
INDIANAPOLIS IN

☐ DELETE

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13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1 1 TITLE
12 NAME
13 STREET ADDRESS
14 CITY - ST - ZIP
2 1 TITLE
22 NAME
23 STREET ADDRESS
24 CITY - ST - ZIP
3 1 TITLE
32 NAME
33 STREET ADDRESS
34 CITY - ST - ZIP
4 1 TITLE
42 NAME
43 STREET ADDRESS
44 CITY - ST - ZIP
5 1 TITLE
52 NAME
53 STREET ADDRESS
54 CITY - ST - ZIP
6 1 TITLE
62 NAME
63 STREET ADDRESS
64 CITY - ST - ZIP

Vice President &

☐ Change

☒ Addition

President & Director

☒ Change

☐ Addition

Assistant Secretary
Warren W. Byrd
1919 S. Post Road
Indianapolis, IN

☐ Change

☒ Addition

Vice President & Director
David H. Hill
1919 S. Post Road
Indianapolis, IN 46239

☐ Change

☒ Addition

Secretary & Vice Pres.
Jerry Williams
1919 S. Post Road
Indianapolis, IN 46239

☐ Change

☒ Addition

Vice President & Treasurer
Jeffrey K. Harty
1919 S. Post Road
Indianapolis, IN 46239

☐ Change

☒ Addition

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:

Warren W. Byrd
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ASSISTANT

Date

2/15/96 (317) 862-7220
Daytime Phone #

CR2E034 (12/95)