

2007 FOR PROFIT CORPORATION ANNUAL REPORT

04-02-2007 90086 003 ***150.00
FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

07 APR -5 AM 7:02

DOCUMENT # 236073 1. Entity Name ASSOCIATED RACK CORPORATION					
Principal Place of Business 1245 16TH STREET VERO BEACH, FL 32960 US			Mailing Address 1245 16TH STREET VERO BEACH, FL 32960 US		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number 59-0911600	
Zip		Country		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent FAULMAN, WILLIAM 1245 16TH STREET VERO BEACH, FL 32960			7. Name and Address of New Registered Agent 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 _____ (NOTE: Registered Agent signature required when registering) 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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D FAULMAN, WILLIAM 1245 16TH STREET VERO BEACH, FL 32960	☐ Delete ☐ Change ☒ Addition			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D FAULMAN, MICHAEL 1245 16TH STREET VERO BEACH, FL 32960	☐ Delete ☐ Change ☒ Addition			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D FAULMAN, VIRGINIA 1245 16TH STREET VERO BEACH, FL	☒ Delete ☐ Change ☐ Addition			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S FAULMAN, PHYLLIS 1245 16TH ST VERO BEACH, FL 32960	☐ Delete ☐ Change ☐ Addition			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D/T FAULMAN, MICHAEL 1245 16TH STREET VERO BEACH, FL 32960	☐ Delete ☐ Change ☒ Addition			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D/S FAULMAN, PHYLLIS 1245 16TH STREET VERO BEACH, FL 32960	☐ Delete ☐ Change ☐ Addition			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D/S FAULMAN, PHYLLIS 1245 16TH STREET VERO BEACH, FL 32960	☐ Delete ☐ Change ☐ Addition			
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: <u>Michael Faulman</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date: <u>11/10/07</u> Daytime Phone #: <u>772-567-4771</u>		