

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F42021

FILED  
Jan 07, 2011  
Secretary of State

**Entity Name:** ASSOCIATED INTERNATIONAL MARKETING, INC.

**Current Principal Place of Business:**

% SAMUEL WILLIAM JOHNSTON, III  
1915 NW 13TH STREET  
GAINESVILLE, FL 326093484

**New Principal Place of Business:**

1915 NW 13TH ST  
GAINESVILLE, FL 32609 US

**Current Mailing Address:**

% SAMUEL WILLIAM JOHNSTON, III  
1915 NW 13TH STREET  
GAINESVILLE, FL 326093484

**New Mailing Address:**

1915 NW 13TH ST  
GAINESVILLE, FL 32609 US

**FEI Number:** 59-2116078

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

JOHNSTON, SAMUEL WILLIAM, III  
1915 NW 13TH STREET  
GAINESVILLE, FL 32601 US

**Name and Address of New Registered Agent:**

JOHNSTON, SAMUEL W III  
1915 NW 13TH STREET  
GAINESVILLE, FL 32609 US

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.

SIGNATURE: SAMUEL W. JOHNSTON III

01/07/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: DP  
Name: JOHNSTON, SAMUEL W, III  
Address: 1914 NW 12TH TERRACE  
City-St-Zip: GAINESVILLE, FL 32609 US

Title: ST  
Name: JOHNSTON, CAROLYN M.T.  
Address: 1914 NW 12TH TERRACE  
City-St-Zip: GAINESVILLE, FL 32609 US

Title: DV  
Name: JOHNSTON, DAVID D  
Address: 15428 NW 48TH PL.  
City-St-Zip: ALACHUA, FL 32615 US

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: SAMUEL W. JOHNSTON III

DP

01/07/2011

Electronic Signature of Signing Officer or Director

Date