

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 15, 2008 08:00 AM
Secretary of State

DOCUMENT # 181217

1. Entity Name
DON ASHER AND ASSOCIATES INC



Principal Place of Business

**1801 COOK AVENUE
ORLANDO, FL 32806 US**

Mailing Address

**1801 COOK AVENUE
ORLANDO, FL 32806 US**



02062008 No Chg-P CR2E034 (11/05)

4. FEI Number
59-0721824

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

**ASHER, DONALD
1801 COOK AVENUE
ORLANDO, FL 32806**

**DO NOT WRITE
IN THIS SPACE**

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

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, 2008 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be
Added to Fees**

U000000951959
06/04/08-80058-024 150.00

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	ASHER, DONALD L
STREET ADDRESS	1801 COOK AVENUE
CITY- ST- ZIP	ORLANDO, FL 32806
TITLE	DST
NAME	ASHER, MARY JO
STREET ADDRESS	1801 COOK AVENUE
CITY- ST- ZIP	ORLANDO, FL 32806
TITLE	VP
NAME	ASHER, STEVEN D
STREET ADDRESS	1801 COOK AVENUE
CITY- ST- ZIP	ORLANDO, FL 32806
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	

**DO NOT WRITE
IN THIS SPACE**

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:

DONALD L. ASHER, JR
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/9/2008
Date

462-425-4561
Daytime Phone #