

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 373172

FILED
Jan 10, 2007
Secretary of State

Entity Name: FREEMAN ASSOCIATES, INCORPORATED

Current Principal Place of Business:

7491 N FEDERAL HWY
C-5 260
BOCA RATON, FL 33487 US

New Principal Place of Business:

Current Mailing Address:

7491 N FEDERAL HWY
C-5 260
BOCA RATON, FL 33487 US

New Mailing Address:

FEI Number: 59-1318084 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FREEMAN, HAGAN C
7200 NW 2ND AVE
115
BOCA RATON, FL 33487 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: FREEMAN, JR., ROBERT M
Address: 5001 STAVERLY LANE
City-St-Zip: NORCROSS, GA 30092

Title: VP (X) Delete
Name: FREEMAN, HAGAN C
Address: 7200 NW 72ND AVE #115
City-St-Zip: BOCA RATON, FL 33487

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: FREEMAN, HAGAN C
Address: 7200 NW 72ND AVE #115
City-St-Zip: BOCA RATON, FL 33487

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: C. HAGAN FREEMAN

P

01/10/2007

Electronic Signature of Signing Officer or Director

_____ Date