2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 566593

Entity Name: EASTLAND ASSOCIATES, INC.

SACRAMENTO, CA 95823

City-St-Zip:

FILED Mar 01, 2007 Secretary of State

Current P	rincipal Place	of Business:	New Principal Place	New Principal Place of Business:	
PO BOX 231003 SACRAMENTO, CA 95823			80 HERMES CIRCLE SACRAMENTO, CA S	80 HERMES CIRCLE SACRAMENTO, CA 95823	
Current M	lailing Addres	s:	New Mailing Address	New Mailing Address:	
80 HERMES CIRCLE SACRAMENTO, CA 95823			P. O. BOX 231003 SACRAMENTO, CA S	P. O. BOX 231003 SACRAMENTO, CA 95823	
FEI Number	: 59-1819365	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
KISSIMME The above	KSHIRE CT E, FL 34746	US submits this statement for the	purpose of changing its registere	d office or registered agent, or both,	
SIGNATUI	RE:				
	Electron	ic Signature of Registered Ac	gent	Date	
Election Car	mpaign Financing	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	MAO, ALAIN, 2440 BERKSHI KISSIMMEE, FI		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address:	VPD (X) JING-NEE, MAC 80 HERMIS CIF		Title: Name: Address:	() Change () Addition	

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: ALAIN MAO PD 03/01/2007