

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 767688

FILED
Feb 18, 2011
Secretary of State

Entity Name: ASGHSMO ASSEMBLY, INCORPORATED

Current Principal Place of Business:

245 HOPSON ROAD
FROSTPROOF, FL 33843

New Principal Place of Business:

Current Mailing Address:

245 HOPSON ROAD
P.O. BOX 6
FROSTPROOF, FL 33843

New Mailing Address:

FEI Number: 59-1733796 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

SHEPPARD, MARY A
32 ROOSEVELT AVE
FROSTPROOF, FL 33843 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

OFFICERS AND DIRECTORS:

Title: PD
Name: NELSON, JAMES C.
Address: 170 MIRACLE PLACE
City-St-Zip: FROSTPROOF, FL 33843

Title: D
Name: SHEPPARD, MARY A
Address: 32 ROOSEVELT AVE
City-St-Zip: FROSTPROOF, FL 33843

Title: D
Name: HAMILTON, CAROLYN
Address: 32 ROOSEVELT AVE
City-St-Zip: FROSTPROOF, FL 33843

Title: D
Name: ANDREWS, DARRELL
Address: 1717 W. COMMONWEALTH DR
City-St-Zip: FRONT ROYAL, VA 22630

Title: D
Name: MILLS, CLARENCE
Address: 30 TEMPLE COURT
City-St-Zip: FROSTPROOF, FL 33843

Title: D
Name: HOBBS, JANET
Address: 28 MONROE STREET P.O. BOX 1141
City-St-Zip: FROSTPROOF, FL 33843

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: MARY A SHEPPARD

D

02/18/2011

Electronic Signature of Signing Officer or Director

Date