

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F01000001788

Entity Name: AMALFI ASSOCIATES, INC.

FILED
Mar 24, 2009
Secretary of State

Current Principal Place of Business:

12 GILFORD EAST DRIVE
GILFORD, NH 03246

New Principal Place of Business:

29 GILFORD EAST DRIVE
GILFORD, NH 03249 US

Current Mailing Address:

12765 FOREST HILL BLVD
SUITE 1302
WELLINGTON, FL 33414

New Mailing Address:

C/O MARIO G. DE MENDOZA, III, P.A.
12765 FOREST HILL BLVD, SUITE 1302
WELLINGTON, FL 33414 US

FEI Number: 04-2705704

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MARIO G. DE MENDOZA, III, P.A.
12765 FOREST HILL BLVD STE 1302
WEST PALM BEACH, FL 33414 US

Name and Address of New Registered Agent:

MARIO G. DE MENDOZA, III, P.A.
12765 FOREST HILL BLVD STE 1302
WELLINGTON, FL 33414 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:

03/24/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: AMALFITANO, MICHAEL L
Address: 12 GILFORD EAST DRIVE
City-St-Zip: GILFORD, NH 03246

Title: S () Delete
Name: HONIG, STEPHEN M
Address: 265 FRANKLIN STREET
City-St-Zip: BOSTON, MA 021103192

Title: T (X) Delete
Name: MESSINA, JOSEPH
Address: 73 PARK AVENUE
City-St-Zip: BLOOMFIELD, NJ 07003

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PT (X) Change () Addition
Name: HEINEMANN, MATTHEW
Address: 29 GILFORD EAST DRIVE
City-St-Zip: GILFORD, NH 03249 US

Title: S (X) Change () Addition
Name: HONIG, STEPHEN M
Address: 619 LEWIS WHARF
City-St-Zip: BOSTON, MA 02110 US

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

I hereby certify that the information supplied with this filing does not qualify 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: MATTHEW HEINEMANN

PRES

03/24/2009

Electronic Signature of Signing Officer or Director

Date