

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000006114

FILED
Mar 30, 2009
Secretary of State

Entity Name: BOB HOLLANDER ASSOCIATES, INC.

Current Principal Place of Business:

2100 MIDDLE COUNTRY RD.
CENTEREACH, NY 11720

New Principal Place of Business:

Current Mailing Address:

2100 MIDDLE COUNTRY RD.
CENTEREACH, NY 11720

New Mailing Address:

FEI Number: 11-2619630

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HOLLANDER, MICHAEL
224 DATURA STREET
SUITE 914
WEST PALM BEACH, FL 33401 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: C () Delete
Name: HOLLANDER, ROBERT
Address: 10807 ROYAL DEVON WAY
City-St-Zip: LAKE WORTH, FL 33467

Title: P () Delete
Name: HOLLANDER, MICHAEL
Address: 2100 MIDDLE COUNTRY RD.
City-St-Zip: CENTEREACH, NY 11720

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: P (X) Change () Addition
Name: HOLLANDER, MICHAEL
Address: 2056 RESTON CIRCLE
City-St-Zip: ROYAL PALM BEACH, FL 33411

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: ROBERT HOLLANDER

CFO

03/30/2009

Electronic Signature of Signing Officer or Director

Date