2006 FOR PROFIT CORPORATION **ANNUAL REPORT**

Aug 01, 2006 8:00 am Secretary of State DOCUMENT # F0400003860 08-01-2006 90001 009 ***550.00 1. Entity Name ADVANCE MANAGEMENT ASSOCIATION CORP. Principal Place of Business Mailing Address 781 GARWOOD RD PO BOX 640 MORRESTOWN, NJ 08057 MOORESTOWN, NJ 08057 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 07172006 CR2E034 (11/05) City & State City & State 4. FEI Number Applied For 23-2419128 Not Applicable Zip Zip Country Country \$8.75 Additional 5. Certificate of Status Desired П 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent LAWSON, ERIC 5218 SW 2ND PL. Street Address (P.O. Box Number is Not Acceptable) CAPE CORAL, FL 33914 City Zip Code FL 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE. Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$550.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees Due by September 6, 2006 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. CPST TITLE ☐ Delete TITLE Change ☐ Addition LAWSON, FRANK NAME NAME STREET ADDRESS 781 GARWOOD RD STREET ADDRESS CITY-ST-ZIP MORRESTOWN, NJ 08057 CITY-ST-7IP ☐ Delete ☐ Change TITLE TITLE ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Defete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Detete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address

CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

7-20-06 856-605-78

Date Daylime Prope 8

FILED

AMC FIRE PROTECTION

ATTACHMENT

ADVANCE MANAGEMENT CORPORATION AUTOMATIC SPRINKLER SYSTEMS P.O. BOX 640 MOORESTOWN, NJ 08057 (856) 608-7878 FAX (856) 608-1903 20051273

July 26, 2006

Florida Dept of State Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

RE: Late Fee-

Doc. No. F04000003860

To Whom It May Concern

We did not receive the annual Document Report until after the required filing date. I would appreciate it, if you would consider wavering the \$400.00 late fee. Our Check for \$550.00 is enclosed with the completed form attached.

Thank you for your help in this matter.

Barbara Dosleif

Sincerely.

Barbara Dooley