2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F07000002824

Title:

Name:

Address:

City-St-Zip:

SEC

RICHARDSON, SANDRA

ORLANDO, FL 32828

2860 S. ALAFAYA TR. SUITE 120

Entity Name: AFR & ASSOCIATES, INC.

FILED Mar 05, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 14130 POPCORN TREE CT ORLANDO, FL 32828 **Current Mailing Address: New Mailing Address:** 2860 S. ALAFAYA TRAIL SUITE 120 ORLANDO, FL 32828 FEI Number: 58-2247043 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: NRAI SERVICES, INC 2731 EXECUTIVÉ PARK DR., SUITE 4 WESTON, FL 33331 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: PRFS (X) Change () Addition RICHARDSON, ANTHONY F RICHARDSON, ANTHONY F Name: Name: 14130 POPCORN TREE CT 14130 POPCORN TREE CT Address: Address: City-St-Zip: ORLANDO, FL 32828 City-St-Zip: ORLANDO, FL 32828 Title: Title: (X) Change () Addition () Delete ANTHONY, RICHARDSON F Name: ANTHNY, RICHARDSON F Name: 14130 POPCORN TREE CT 14130 POPCORN TREE CT Address: Address: ORLANDO, FL 32828 ORLANDO, FL 32828 City-St-Zip: City-St-Zip: () Delete

Title: CFO () Delete Title: () Change () Addition SANDRA, RICHARDSON Name: Name: Address: 2860 S. ALAFAYA TR. SUITE 120 Address: City-St-Zip: ORLANDO, FL 32828 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.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: ANTHONY RICHARDSON **PRES** 03/05/2009

() Change () Addition