

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F30858

Entity Name: ASSOCIATED POLYGRAPH, INC.

FILED
Feb 06, 2009
Secretary of State

Current Principal Place of Business:

% WILLIAM B FRAZIER
140 N. ORLANDO AVE., STE. 150-7
WINTER PARK, FL 32789

Current Mailing Address:

% WILLIAM B FRAZIER
140 N. ORLANDO AVE., STE. 150-7
WINTER PARK, FL 32789

FEI Number: 59-2100853

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FRAZIER, WILLIAM B
140 N. ORLANDO AVE., STE. 150-7
WINTER PARK, FL 32789 US

Name and Address of New Registered Agent:

FRAZIER, WILLIAM B
140 N. ORLANDO AVE.
SUITE 150
WINTER PARK, FL 32789 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:

02/06/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: FRAZIER, WILLIAM B,
Address: 140 N. ORLANDO AV #150-7
City-St-Zip: WINTER PARK, FL 00000,

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: FRAZIER, WILLIAM B
Address: 140 N. ORLANDO AVE., STE. 150
City-St-Zip: WINTER PARK, FL 32789

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: WILLIAM B FRAZIER

PD

02/06/2009

Electronic Signature of Signing Officer or Director

Date