

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F36319

**FILED**  
**Feb 10, 2012**  
**Secretary of State**

**Entity Name:** ASSOCIATED INVESTIGATORS, INC.

**Current Principal Place of Business:**

2800 S SANFORD AVE  
SANFORD, FL 32773 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 620458  
OVIEDO, FL 32762 US

**New Mailing Address:**

**FEI Number:** 59-2171891

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

CASE, DAVID  
2800 S SANFORD AVE  
SANFORD, FL 32773 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

**OFFICERS AND DIRECTORS:**

Title: DPS  
Name: CASE, DAWN  
Address: P.O. BOX 620458  
City-St-Zip: OVIEDO, FL 32762

Title: VPT  
Name: CASE, DAVID  
Address: P.O. BOX 620458  
City-St-Zip: OVIEDO, FL 32762

I hereby 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 all other like empowered.

SIGNATURE: DAWN CASE

PRES

02/10/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date