

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F94000004178

Entity Name: CASHIN ASSOCIATES, P.C.

FILED
Jan 31, 2007
Secretary of State

Current Principal Place of Business:

1200 VETERANS MEMORIAL HWY.
HAUPPAUGE, NY 11788

New Principal Place of Business:

Current Mailing Address:

1200 VETERANS MEMORIAL HWY.
HAUPPAUGE, NY 11788

New Mailing Address:

FEI Number: 11-2325811

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CARILLO, CARLOS F
601 BRICKELL KEY DR.
SUITE 606
MIAMI, FL 33131 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: PDC () Delete
Name: ANGIOLA, ALFRED
Address: 3 FLOWER HILL CT.
City-St-Zip: HUNTINGTON, NY 11743

Title: VTD () Delete
Name: CASHIN, FRANCIS J
Address: 202 DERBY ST.
City-St-Zip: EAST WILLISTON, NY 11596

Title: VD () Delete
Name: MARLETTI, ALDO
Address: RR #3 SOUTHVIEW COURT
City-St-Zip: WADING RIVER, NY 11793

Title: SVD () Delete
Name: GLADYSE, JAMES
Address: 4 SHELTER HARBOR COURT
City-St-Zip: WADING RIVER, NY 11792

Title: VD () Delete
Name: IANNUCCI, JOSEPH
Address: 34 SCHNEIDER LANE
City-St-Zip: HAUPPAUGE, NY 11788

Title: VD () Delete
Name: FEENEY, JAMES
Address: 14 MAYFAIR COURT
City-St-Zip: NESCONSET, NY 11767

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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: FRANCIS J CASHIN

VTD

01/31/2007

Electronic Signature of Signing Officer or Director

Date