2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H82406

Entity Name: MALLARD & ASSOCIATES INC.

12171 NW 164TH CT. N

JUPITER, FL 33478

Address: City-St-Zip: FILED Jan 23, 2008 Secretary of State

		a / 10000 // 1100, 1140.			
Current Principal Place of Business:			New Principal Place of	New Principal Place of Business:	
6991 W BF 105A	ROWARD BLVE).	8201 PETERS ROAD SUITE 1000		
PLANTATION	ON, FL 33317	US	PLANTATION, FL 33324	1 US	
Current M	ailing Address	:	New Mailing Address:	New Mailing Address:	
STE. #105/	ROWARD BLVI A ON, FL 33317	O US	8201 PETERS ROAD SUITE 1000 PLANTATION, FL 33324	4 US	
	,		,		
FEI Number:	59-2650014	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address of N	Name and Address of New Registered Agent:	
1680 SW 5 PLANTATION	EDGAR Y. 4TH TERR ON, FL 33317	US	vurnaca of changing its registered o	effice or registered agent or both	
in the State		iomits this statement for the p	ourpose of changing its registered o	office or registered agent, or both,	
SIGNATUR	RE:				
	Electronic	Signature of Registered Age	ent	Date	
Election Can	npaign Financing	Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PD () [MALLARD, EDGA 1680 SW 54TH T PLANTATION, FL	ERR	Title: () Name: Address: City-St-Zip:) Change ()Addition	
Title: Name: Address: City-St-Zip:	D () [MALLARD, JUDY 1680 SW 54TH T PLANTATION, FL	ERRACE	Title: () Name: Address: City-St-Zip:) Change ()Addition	
Title: Name:	VP () [MALLARD, ROBE	Delete ERT C V-PRES	Title: () Name:) Change ()Addition	

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.

Address:

City-St-Zip:

SIGNATURE: EDGAR Y MALLARD PD 01/23/2008