

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J98145

Entity Name: IVEY & ASSOCIATES, INC.

FILED
Sep 03, 2009
Secretary of State

Current Principal Place of Business:

6104 WHIMBRELWOOD DR
LITHIA, FL 33547 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 6549
BRANDON, FL 33508 US

New Mailing Address:

FEI Number: 59-2851843

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

IVEY, THOMAS R
16120 BRIDGEDALE DR
LITHIA, FL 33547 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: PCM () Delete
Name: IVEY, THOMAS R
Address: 6104 WHIMBRELWOOD DR
City-St-Zip: LITHIA, FL 33547

Title: STD () Delete
Name: EFTYHIA, IVEY
Address: 6104 WHIMBRELWOOD DR
City-St-Zip: LITHIA, FL 33547 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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: THOMAS R IVEY

PCM

09/03/2009

_____ Electronic Signature of Signing Officer or Director

_____ Date