## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# K32236

FILED Mar 10, 2009 Secretary of State

Entity Name: ASSOCIATED CONFERENCES SECRETARIAT, INC.

urrent P	rincipai Plac	e of Business:	New Principal Place	OT BUSINESS:
	ST ATLANTIC PRINGS, FL (			
urrent Mailing Address:		ss:	New Mailing Address:	
	ST ATLANTIC PRINGS, FL			
El Number	: 65-0069349	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )
ame and	l Address of	Current Registered Agent:	Name and Address of	of New Registered Agent:
	A, JOSE VP ST ATLANTIC	C BLVD		
	PRINGS, FL			
ORAL SI he above	PRINGS, FL (	33071 US	purpose of changing its registere	ed office or registered agent, or both,
ORAL SI	PRINGS, FL 3 named entity e of Florida.	33071 US	purpose of changing its registere	ed office or registered agent, or both,
ORAL SI he above the State	PRINGS, FL 3 named entity of Florida.  RE:	33071 US		ed office or registered agent, or both,  Date
ORAL SI he above the State	PRINGS, FL 3 named entity of Florida.  RE: Electro	33071 US submits this statement for the		
ORAL SI he above the State IGNATUI	PRINGS, FL 3 named entity of Florida.  RE: Electro	33071 US submits this statement for the nic Signature of Registered Ag	gent	
ORAL SI he above the State IGNATUI	e named entity e of Florida.  RE: Electro  mpaign Financi  S AND DIREC  P ( LE BLANC, TE 12450 WEST	submits this statement for the nic Signature of Registered Ageng Trust Fund Contribution ( ).  CTORS:  ) Delete	gent	Date
ORAL SI ne above the State GNATUI ection Car FFICER le: ame: ldress:	e named entity e of Florida.  RE:  Electro  mpaign Financir  S AND DIREC  P ( LE BLANC, TE 12450 WEST CORAL SPRIM  SVP ( DE BRAGA, JG 12450 WEST	submits this statement for the submits this statement for the nic Signature of Registered Ageng Trust Fund Contribution ( ).  CTORS:  ) Delete ED P ATLANTIC BLVD NGS, FL 33071  ) Delete	gent  ADDITIONS/CHANG  Title:  Name:  Address:	Date ES TO OFFICERS AND DIRECTOR

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: BRENDA JOHNSTON SVP 03/10/2009