

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K68876

**FILED**  
**Apr 22, 2012**  
**Secretary of State**

**Entity Name:** AFFILIATED RESOURCE ASSOCIATES, INC.

**Current Principal Place of Business:**

6733 TOM KING BAYOU RD  
NAVARRE, FL 32566 US

**New Principal Place of Business:**

5430 PENNY CREEK RD.  
HOLT, FL 32564 US

**Current Mailing Address:**

P.O. BOX 5296  
NAVARRE, FL 325668924 US

**New Mailing Address:**

P.O. BOX 9  
HOLT, FL 32564 US

**FEI Number:** 59-2933257

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

PARKER, JENNIFER T  
6733 TOM KING BAYOU RD  
NAVARRE, FL 32566 US

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

PARKER, JENNIFER T  
5430 PENNY CREEK RD.  
HOLT, FL 32564 US

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:

04/22/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PTS  
Name: PARKER, JENNIFER  
Address: 5430 PENNY CREEK RD.  
City-St-Zip: HOLT, FL 32564 US

Title: D  
Name: PARKER, BRADLEY K  
Address: 5430 PENNY CREEK RD.  
City-St-Zip: HOLT, FL 32564 US

Title: V  
Name: PARKER, ERIN  
Address: 5430 PENNY CREEK RD.  
City-St-Zip: HOLT, FL 32564 US

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: JENNIFER T. PARKER

PTS

04/22/2012

Electronic Signature of Signing Officer or Director

Date