## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# L81775

Entity Name: HARTMAN & ASSOCIATES, INC.

FILED Jan 20, 2009 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:		
201 E PINE SUITE 100 ORLANDO		US				
Current Mailing Address:				New Mailing Address:		
3475 E. FOOTHILL BLVD PASADENA, CA 91107						
FEI Number:	59-3017326	FEI Number Applied For ( )	FEI Number	r Not Appli	cable ( ) Certificate of Status Desired (X)	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:						
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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:						
Electronic Signature of Registered Agent					Date	
Election Can	npaign Financin	g Trust Fund Contribution ( ).				
OFFICERS AND DIRECTORS:			A	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	PAT ( RYNNING, MAF 201 E PINE ST ORLANDO, FL	, STE 1000	Ado	e: me: dress: y-St-Zip:	PAT (X) Change ( ) Addition RYNNING, MARK A 201 E PINE ST, STE 1000 ORLANDO, FL 32801	
Title: Name: Address: City-St-Zip:	V ( BATTRACK, DA 3475 E FOOTH PASADENA, CA	IILL BLVD			() Change () Addition	
Title: Name: Address: City-St-Zip:	V ( CHRISTOPHER 201 E PINE ST ORLANDO, FL		Ado	e: me: dress: y-St-Zip:	V (X) Change ( ) Addition BOX, SAM W 3475 E. FOOTHILL BLVD. PASADENA, CA 91107	
Title: Name: Address: City-St-Zip:	VPSD ( LEMMON, RICI 3475 E FOOTH PASADENA, CA	IILL BLVD			() Change () Addition	
Title: Name: Address: City-St-Zip:	V ( DRAKE, CHAR 201 E PINE ST ORLANDO, FL				V (X) Change ( ) Addition MUSSER, WILLIAM 201 E PINE ST., STE 1000 ORLANDO, FL 32801	
Title: Name: Address: City-St-Zip:	T ( KING, DAVID V 3475 E FOOTH PASADENA, CA	IILL BLVD			() 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.

SIGNATURE: RICHARD A. LEMMON VPSD 01/20/2009