

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000045851

FILED
Apr 20, 2009
Secretary of State

Entity Name: ASSET ASSOCIATES, INC.

Current Principal Place of Business:

P. O. BOX 858
PONTE VEDRA BCH, FL 32082

New Principal Place of Business:

826 PONTE VEDRA BOULEVARD
PONTE VEDRA BCH, FL 32082

Current Mailing Address:

P. O. BOX 858
PONTE VEDRA BCH, FL 32082

New Mailing Address:

826 PONTE VEDRA BOULEVARD
PONTE VEDRA BCH, FL 32082

FEI Number: 59-3466870

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEMONS, MARVIN C
748 SP. NNAKERS BEACH DRIVE
PO BOX 1638
PONTE VEDRA BCH, FL 32082 US

Name and Address of New Registered Agent:

LEMONS, MARVIN C
826 PONTE VEDRA BOULEVARD
PONTE VEDRA BCH, FL 32082 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:

04/20/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: LEMONS, MARVIN C
Address: 10036 SAWGRASS DR. WEST, SUITE 4 SOUTH
City-St-Zip: PONTE VEDRA BCH, FL 32082

Title: D () Delete
Name: LEMONS, BETTY
Address: 181 WATER OAK DR
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: D () Delete
Name: LEMONS, L. CLARKE
Address: 181 WATER OAK DR
City-St-Zip: PONTE VEDRA BEACH, FL 32082

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: LEMONS, MARVIN C
Address: 826 PONTE VEDRA BOULEVARD
City-St-Zip: PONTE VEDRA BCH, FL 32082

Title: D (X) Change () Addition
Name: LEMONS, BETTY
Address: 826 PONTE VEDRA BOULEVARD
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: D (X) Change () Addition
Name: LEMONS, LANCE C
Address: 826 PONTE VEDRA BOULEVARD
City-St-Zip: PONTE VEDRA BEACH, FL 32082

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: MARVIN C. LEMONS

PRES

04/20/2009

Electronic Signature of Signing Officer or Director

Date