

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 22, 2004 08:00 AM
Secretary of State

DOCUMENT # P01000072826 Entity Name ADJUSTER ASSOCIATES, INC.	
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Principal Place of Business 869 BAYOU VIEW DR. BRANDON, FL 33510	Mailing Address PO BOX 482 MANGO, FL 33550
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DO NOT WRITE IN THIS SPACE



04192004 No Chg-P CR2E034 (10/03)

4. FEI Number 59-3734145	Applied For Not Applicable
5. Certificate of Status Desired ☒	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent YACH, ROY H SR. 869 BAYOU VIEW DR. BRANDON, FL 33510

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IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ Signature, typed or printed name of registered agent and title if applicable	(NOTE: Registered Agent signature required when retreating)	DATE _____
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FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	U00000125141 04/22/04-80073-011 8.75
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D YACH, ROY H JR. 2903 WILDER CREEK CIRCLE PLANT CITY, FL 33566
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MUENCH, ANDREA 9910 BIG BEND RD. RIVERVIEW, FL 33569
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BUBOLZ, RHONDA 2510 WILSON CT., #7 APPLETON, WI 54915
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D YACH, ROY H SR. 869 BAYOU VIEW DR. BRANDON, FL 33510
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D YACH, LINDA A 869 BAYOU VIEW DR. BRANDON, FL 33510
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MARTIN, WENDY 300 SHINDLER PLACE #307 MENASHA, WI 54952

U00000125141
04/22/04-80073-012 150.00

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: <u>Roy H Yach Sr</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	<u>4-19-04</u> Date	<u>813-643-5893</u> Daytime Phone #
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