

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000100699

FILED  
Mar 30, 2009  
Secretary of State

Entity Name: EAST COUNTY ASSOCIATES, INC.

## Current Principal Place of Business:

2881 CLARK RD  
UNIT 25  
SARASOTA, FL 34231

## New Principal Place of Business:

## Current Mailing Address:

2881 CLARK RD  
UNIT 25  
SARASOTA, FL 34231

## New Mailing Address:

FEI Number: 59-3759794

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

OSMOND, J. MICHAEL  
1104 92ND STREET  
NORTHWEST  
BRADENTON, FL 34209 US

## Name and Address of New Registered Agent:

OSMOND, JAMES M  
1104 92ND STREET  
NORTHWEST  
BRADENTON, FL 34209 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: JAMES M. OSMOND

03/30/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: OSMOND, JAMES M  
Address: 1104 92ND STREET NW  
City-St-Zip: BRADENTON, FL 34209

Title: S ( ) Delete  
Name: OSMOND, JAMES L  
Address: 4002 23RD AVE W  
City-St-Zip: BRADENTON, FL 34205

Title: V ( ) Delete  
Name: OSMOND, BRANDON M  
Address: 7203 6TH AVE NW  
City-St-Zip: BRADENTON, FL 34209

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: JAMES M. OSMOND

P

03/30/2009

Electronic Signature of Signing Officer or Director

Date