2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P01000117820

1. Enlity Name

FISHER CREEK ASSOCIATES, INC.



FILED May 12, 2008 08:00 AN Secretary of State

Principal Place of Business

4801 ULMERTON RD CLEARWATER, FL 34622 Mailing Address

4801 ULMERTON RD CLEARWATER, FL 34622



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05082008 No Chg-P

CR2E034 (11/05)

4. FEI Number Applied For 30-0006992 Applied For Not Applicable

5. Capitago et State Deced 5. \$8.75 Additional

5. Certificate of Status Desired

\$6.75 Additional Fee Required

6. Name and Address of Current Registered Agent

LINDSEY, FRED D 4801 ULMERTON RD CLEARWATER, FL 33762

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	he above named ended above named ended to the second secon		tement for the purpose of char	nging its registered office or registered agent, or bo	oth, in the State of Florida.	I am familiar with, and accept
SIGI	NATURESignature, 1	lyped or printed name of regis	stered agent and title it applicable	(NOTE: Registered Agent signature required when reinstating)		DATE
					1	

FILE NOW!!! FEE IS \$150.00 Due by September 12, 2008 Election Campaign Financing
 Trust Fund Contribution

\$5.00 May Be Added to Fees In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10.	OFFICERS AND DIRECTORS					
TITLE NAME	CDP EVANS, RICHARD EVAN					
STREET ADDRESS	4801 ULMERTON RD					
CITY - ST - ZIP	CLEARWATER, FL 34622					
TITLE	DS					
NAME	EVANS, LUELLA M					
STREET ADDRESS	4801 ULMERTON RD					
CITY - ST - ZIP	CLEARWATER, FL 34622					
TITLE	Т					
NAME	LINDSEY, FRED D					
STREET ADDRESS	4801 ULMERTON ROAD					
CITY-ST-ZIP	CLEARWATER, FL 33762					
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12. Thereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7275727000