2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 06, 2008
Secretary of State

DOCUMENT# P02000046515

Entity Name: FTM ASSOCIATES, INC.

Current Principal Place of Business:

342 NW 232 TERRACE
NEWBERRY, FL 32669

New Principal Place of Business:

Current Mailing Address:

342 NW 232 TERRACE
NEWBERRY, FL 32669

New Mailing Address:

FEI Number: 04-3687787 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

MIJARES, FRANK
342 NW 232 TERRACE
NEWBERRY, FL 32669 US

Name and Address of New Registered Agent:

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 Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: VT ( ) Delete
Name: MIJARES, MARGARET
Address: 1715 N. 45TH AVE.
City-St-Zip: HOLLYWOOD, FL 33021

Title: D ( ) Delete
Name: MIJARES, SCOTT
Address: 1715 N. 45TH AVE.
City-St-Zip: HOLLYWOOD, FL 33021

Title: D ( ) Delete
Name: MIJARES, ROBIN
Address: 1715 N. 45TH AVE.
City-St-Zip: HOLLYWOOD, FL 33021

Title: D (X) Delete
Name: MIJARES-WHITE, MARCY
Address: 1715 N. 45TH AVE.
City-St-Zip: HOLLYWOOD, FL 33021

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change ( ) Addition
Name: MIJARES, MARCY
Address: 1715 N. 45TH AVE.
City-St-Zip: HOLLYWOOD, FL 33021

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: FRANK MIJARES PRES 01/06/2008

Electronic Signature of Signing Officer or Director — Date