

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000078031

FILED
Feb 01, 2009
Secretary of State

Entity Name: GENERATIONS ASSET MANAGEMENT COMPANY

Current Principal Place of Business:

464 HIGHTOWER DR
DEBARY, FL 32713

New Principal Place of Business:

Current Mailing Address:

464 HIGHTOWER DR
DEBARY, FL 32713

New Mailing Address:

FEI Number: 55-0787263

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WASHUTA, WILLIAM J
464 HIGHTOWER DR
DEBARY, FL 32713 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: PD () Delete
Name: WASHUTA, WILLIAM J
Address: 464 HIGHTOWER DR
City-St-Zip: DEBARY, FL 32713

Title: VSTD () Delete
Name: WASHUTA, LILA K
Address: 464 HIGHTOWER DR
City-St-Zip: DEBARY, FL 32713

Title: D () Delete
Name: WASHUTA, KEVIN W
Address: 1530 SW. BALMORAL TRACE
City-St-Zip: STUART, FL 34997

Title: D () Delete
Name: POWERS, LAURIE W
Address: 3450 N. TROPICAL TRAIL
City-St-Zip: MERRITT ISLAND, FL 32953

Title: D () Delete
Name: CARAKER, CAROLE W
Address: 4934 LEGACY OAKS DRIVE
City-St-Zip: ORLANDO, FL 32839

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:

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: WILLIAM WASHUTA

MR

02/01/2009

Electronic Signature of Signing Officer or Director

Date