

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000096540

Entity Name: ASSOCIATES IMAGING, INC.

FILED
Apr 28, 2008
Secretary of State

Current Principal Place of Business:

2527 CENTRAL AVENUE
ST. PETERSBURG, FL 33713

New Principal Place of Business:

2529 CENTRAL AVENUE
ST. PETERSBURG, FL 33713

Current Mailing Address:

2527 CENTRAL AVENUE
ST. PETERSBURG, FL 33713

New Mailing Address:

2529 CENTRAL AVENUE
ST. PETERSBURG, FL 33713

FEI Number: 74-3061329

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TURNER, BILL J
3601 BELLE VISTA DR
ST. PETE BEACH, FL 33706 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: P () Delete
Name: TURNER, BILL J
Address: 3601 BELLE VISTA DR
City-St-Zip: ST. PETE BEACH, FL 33706

Title: VP () Delete
Name: POULTER, PRESTON E
Address: 2991 WINTERHUR CLOSE
City-St-Zip: KENNESAW, GA 30144

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: BILL J. TURNER

PRES

04/28/2008

Electronic Signature of Signing Officer or Director

Date