

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000118333

Entity Name: ALLIMAR CORPORATION

FILED
Mar 25, 2009
Secretary of State

Current Principal Place of Business:

1795 ASTOR FARMS PL
SANFORD, FL 32771

New Principal Place of Business:

201 PARK PLACE
SUITE 107
ALTAMONTE SPRINGS, FL 32701

Current Mailing Address:

1795 ASTOR FARMS PL.
SANFORD, FL 32771

New Mailing Address:

201 PARK PLACE
SUITE 107
ALTAMONTE SPRINGS, FL 32701

FEI Number: 05-0537837

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ANDERSON, JOHN
1795 ASTOR FARMS PL.
SANFORD, FL 32771 US

Name and Address of New Registered Agent:

ANDERSON, JOHN
201 PARK PLACE
SUITE 107
ATLAMONTE SPRINGS, FL 32701 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: JOHN ANDERSON

03/25/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: ANDERSON, JOHN
Address: 1795 ASTOR FARMS PL.
City-St-Zip: SANFORD, FL 32771

Title: P () Delete
Name: ANDERSON, ALLISON
Address: 1795 ASTOR FARMS PL.
City-St-Zip: SANFORD, FL 32771

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: ANDERSON, JOHN
Address: PO BOX 50366
City-St-Zip: DEBARRY, FL 32753

Title: P (X) Change () Addition
Name: ANDERSON, ALLISON
Address: PO BOX 50366
City-St-Zip: DEBARRY, FL 32753

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: JOHN ANDERSON

D

03/25/2009

Electronic Signature of Signing Officer or Director

Date