

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000106348

FILED  
Apr 30, 2007  
Secretary of State

**Entity Name:** ASSOCIATES FIRST INSURANCE AGENCY, INC.

**Current Principal Place of Business:**

7200 LAKE ELLENOR DRIVE, SUITE 242  
ORLANDO, FL 32837

**New Principal Place of Business:**

12421 APPOMATOX DR  
ORLANDO, FL 32837

**Current Mailing Address:**

P.O.BOX 770006  
ORLANDO, FL 32837

**New Mailing Address:**

**FEI Number:** 20-0260344      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

AHMAD, ZAHIR  
12421 APPOMATOX DRIVE  
ORLANDO, FL 32837 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: AHMAD, ZAHIR  
Address: 12421 APPOMATOX DRIVE  
City-St-Zip: ORLANDO, FL 32837

Title: MS. (X) Delete  
Name: AHMAD, AMI  
Address: 12421 APPOMATOX DRIVE  
City-St-Zip: ORLANDO, FL 32837

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: AHMAD, ZAHIR  
Address: PO BOX 770006  
City-St-Zip: ORLANDO, FL 328370006

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: ZAHIR AHMAD

P

04/30/2007

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date