

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000012132

Entity Name: TRANSAM ASSOCIATES, INC.

FILED
Feb 17, 2009
Secretary of State

Current Principal Place of Business:

3433 LITHIA PINCREST RD
STE 303
VALRICO, FL 33596

New Principal Place of Business:

3433 LITHIA PINECREST RD
#303
VALRICO, FL 33596 US

Current Mailing Address:

3433 LITHIA PINCREST RD
STE 303
VALRICO, FL 33596

New Mailing Address:

3433 LITHIA PINECREST RD
#303
VALRICO, FL 33596 US

FEI Number: 20-2207683

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LOEHR, LINDA J
3433 LITHIA PINCREST RD
STE 303
VALRICO, FL 33596 US

Name and Address of New Registered Agent:

LOEHR, LINDA J
3433 LITHIA PINECREST RD
#303
VALRICO, FL 33596 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:

02/17/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: LOEHR, LINDA J
Address: 3433 LITHIA PINCREST RD, STE 303
City-St-Zip: VALRICO, FL 33596

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: LOEHR, LINDA J
Address: 3433 LITHIA PINECREST RD, #303
City-St-Zip: VALRICO, FL 33596 US

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: LINDA J LOEHR

P

02/17/2009

Electronic Signature of Signing Officer or Director

Date