

2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P05000080058

FILED
Apr 29, 2009
Secretary of State**Entity Name:** ABSOLUTE PROPERTY MANAGEMENT, INC.**Current Principal Place of Business:**541 S. ST. RD. 7
SUITE 12
MARGATE, FL 33068 US**New Principal Place of Business:****Current Mailing Address:**541 S. ST. RD. 7
SUITE 12
MARGATE, FL 33068 US**New Mailing Address:****FEI Number:** 20-3004721**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**PROGRESSIVE MANAGEMENT ASSOCIATES, INC.
5400 S UNIVERSITY DRIVE
SUITE 101
DAVIE, FL 33328 US**Name and Address of New Registered Agent:**BOTSFORD & WHITE, P.A.
3595 SHERIDAN STREET
SUITE 208
HOLLYWOOD, FL 33021 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: BRUCE BOTSFORD

04/29/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:**Title:** P () Delete
Name: CANFIELD, CAROL-JEAN
Address: 541 S ST RD. 7 # 12
City-St-Zip: MARGATE, FL 33068**Title:** DTS (X) Delete
Name: LOUIS, JONATHAN
Address: 5400 SOUTH UNIVERSITY DRIVE, SUITE 101
City-St-Zip: DAVIE, FL 33328**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** PTSD (X) Change () Addition
Name: LOUIS, JONATHAN
Address: 5400 S UNIVERSITY DRIVE, SUITE 101
City-St-Zip: DAVIE, FL 33328**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: JONATHAN LOUIS

PTSD

04/29/2009

Electronic Signature of Signing Officer or Director

Date