## 2011 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P05000110993

Entity Name: SOURCE ASSET MANAGEMENT INC.

FILED Jan 22, 2011 Secretary of State

Current Principal Place of Business:	New Principal Place of Business
- a	iton i inicipal i lace di Dacinico

157 NW 94TH WAY

CORAL SPRINGS, FL 33071 US

Current Mailing Address: New Mailing Address:

157 NW 94TH WAY

CORAL SPRINGS, FL 33071 US

FEI Number: 56-2526507 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

COLLINS, JOHN C 157 NW 94TH WAY

CORAL SPRINGS, FL 33071 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:

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

Title:

Name: COLLINS, JOHN C Address: 157 NW 94TH WAY

City-St-Zip: CORAL SPRINGS, FL 33071 US

Title: VP

Name: COLLINS, CHARLENE A Address: 157 NW 94TH WAY

City-St-Zip: CORAL SPRINGS, FL 33071 US

Title: SEC

Name: COLLINS, CHARLENE A Address: 157 NW 94TH WAY

City-St-Zip: CORAL SPRINGS, FL 33071 US

Title: TREA

Name: COLLINS, JOHN C Address: 157 NW 94TH WAY

City-St-Zip: CORAL SPRINGS, FL 33071 US

Title: DIR

Name: COLLINS, JOHN C Address: 157 NW 94TH WAY

City-St-Zip: CORAL SPRINGS, FL 33071 US

Title: DIR

Name: COLLINS, CHARLENE A Address: 157 NW 94TH WAY

City-St-Zip: CORAL SPRINGS, FL 33071 US

I hereby 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 all other like empowered.

SIGNATURE: JOHN C COLLINS PRES 01/22/2011