

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000072276

FILED
Apr 23, 2009
Secretary of State

Entity Name: R.M. STANTON & ASSOCIATES, INC.

Current Principal Place of Business:

3374 BOUGAINVILLEA STREET
SARASOTA, FL 34239

New Principal Place of Business:

Current Mailing Address:

3374 BOUGAINVILLEA STREET
SARASOTA, FL 34239

New Mailing Address:

FEI Number: 20-4948894 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STANTON, ROBERT
3374 BOUGAINVILLEA STREET
SARASOTA, FL 34239 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: D () Delete
Name: STANTON, ROBERT
Address: 3374 BOUGAINVILLEA STREET
City-St-Zip: SARASOTA, FL 34239

Title: D () Delete
Name: SCHULTZ, JAMES
Address: 4625 BEACON DRIVE
City-St-Zip: SARASOTA, FL 34232

Title: D () Delete
Name: COOK, STEPHEN
Address: 1501 SHADOW RIDGE CIRCLE
City-St-Zip: SARASOTA, FL 34240

Title: D () Delete
Name: LACERTOSA, GERARD
Address: 4393 WOODVIEW DRIVE
City-St-Zip: SARASOTA, FL 34232

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: ROBERT M. STANTON

PRES

04/23/2009

Electronic Signature of Signing Officer or Director

_____ Date