

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000063723

**FILED**  
**Apr 14, 2009**  
**Secretary of State**

**Entity Name:** ADVANCE MEASUREMENT , INC.

**Current Principal Place of Business:**

207 SE CONDOR GLEN  
HIGH SPRINGS, FL 32643 US

**New Principal Place of Business:**

**Current Mailing Address:**

207 SE CONDOR GLEN  
HIGH SPRINGS, FL 32643 US

**New Mailing Address:**

FEI Number: 26-0270987

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SWILLEY, ROBERT  
3742 BARBIZON CIRCLE SOUTH  
JACKSONVILLE, FL 32257 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: PD ( ) Delete  
Name: SWILLEY, ROBERT  
Address: 3742 BARBIZON CIRCLE SOUTH  
City-St-Zip: JACKSONVILLE, FL 32257 US

Title: V ( ) Delete  
Name: FLOWERS, MIKE  
Address: 207 SE CONDOR GLEN  
City-St-Zip: HIGH SPRINGS, FL 32643 US

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

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 SWILLEY

PD

04/14/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date