

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000095034

FILED
Jan 08, 2008
Secretary of State

Entity Name: CHERRY ASSURANCE GROUP, INC.

Current Principal Place of Business:

379 WEST BASE STREET
MADISON, FL 32340 US

New Principal Place of Business:

323 SE LAKE SHORE DRIVE
MADISON, FL 32340 US

Current Mailing Address:

379 WEST BASE STREET
MADISON, FL 32340 US

New Mailing Address:

379 WEST BASE STREET
MADISON, FL 32340

FEI Number: 26-1294331

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CHERRY, CARSON L JR.
379 WEST BASE STREET
MADISON, FL 32340 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: P, D () Delete
Name: CHERRY, CARSON L JR.
Address: 379 WEST BASE STREET
City-St-Zip: MADISON, FL 32340 FL

Title: S, D () Delete
Name: CHERRY, JULIE
Address: 379 WEST BASE STREET
City-St-Zip: MADISON, FL 32340 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: CARSON LEE CHERRY, JR

P.D

01/08/2008

Electronic Signature of Signing Officer or Director

Date