

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000134821

FILED
Feb 28, 2009
Secretary of State

Entity Name: ALLSTATE & ASSOCIATES FINANCIAL SERVICES INC.

Current Principal Place of Business:

1794 ROGERO ROAD
SUITE 1001
JACKSONVILLE, FL 32211

New Principal Place of Business:

5655-6 TIMUQUANA ROAD
JACKSONVILLE, FL 32210

Current Mailing Address:

1794 ROGERO ROAD
SUITE 1001
JACKSONVILLE, FL 32211

New Mailing Address:

5655-6 TIMUQUANA ROAD
JACKSONVILLE, FL 32210

FEI Number: 06-1832141

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

WITHERUP, FELICIA Y
10695 HAMPTON ROAD
JACKSONVILLE, FL 32257 US

Name and Address of New Registered Agent:

WITHERUP, FELICIA Y
2260 GABRIEL DRIVE
ORANGE PARK, FL 32073 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:

02/28/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: WITHERUP, FELICIA Y
Address: 10695 HAMPTON ROAD
City-St-Zip: JACKSONVILLE, FL 32257

Title: VP () Delete
Name: WITHERUP, HENNIE C
Address: 10695 HAMPTON ROAD
City-St-Zip: JACKSONVILLE, FL 32257

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: WITHERUP, FELICIA Y
Address: 2260 GABRIEL DRIVE
City-St-Zip: ORANGE PARK, FL 32073

Title: VP (X) Change () Addition
Name: WITHERUP, HENNIE C
Address: 2260 GABRIEL DRIVE
City-St-Zip: ORANGE PARK, FL 32073

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: FELICIA WITHERUP

RA

02/28/2009

Electronic Signature of Signing Officer or Director

Date