2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000019145

FILED Apr 24, 2009 Secretary of State

Entity Name: ASSOCIATED INDUSTRIES INSURANCE SERVICES, INC.

		e of Business:		New Princ	ipal Place of	Business:	
01 NW 5 SOCA RA	1ST ST. TON, FL 3343	31					
Current Mailing Address:				New Maili	New Mailing Address:		
O. BOX	310704			P.O. BOX	312319		
OCA RA	TON, FL 3343	31 US		BOCA RAT	TON, FL 3348	312319 US	
El Number	r: 59-3170795	FEI Number Ap	plied For()	FEI Number Not Appl	icable ()	Certificate of Status Desired	()
lame and	d Address of (Current Registe	ered Agent:	Name and	Address of I	New Registered Agent:	
	JON L 1ST STREET TON, FL 3343	310704 US					
	e named entity e of Florida.	submits this stat	ement for the pu	rpose of changing i	ts registered o	office or registered agent, c	r both,
IGNATU	RE:						
	Electro	nic Signature of I	Registered Ager	nt		Date	
lection Ca	mpaign Financin	ng Trust Fund Cont	ribution ().				
FFICER	S AND DIREC	TORS:		ADDITION	IS/CHANGES	TO OFFICERS AND DIR	ECTOF
itle:	,) Delete		Title:	() Change () Addition	
ame:	SHEBEL, JON			Name:			
ddress:	901 NW 51ST	SIREEI					
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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: KERRY J HEITZ T 04/24/2009