2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000032074

Name:

Address:

City-St-Zip:

SHERMAN, JUDITH

FORT WHITE, FL 32038

304 S.W. RUM ISLAND TERRACE

FILED Mar 24, 2009 Secretary of State

Entity Nan	ne: SHER	MAN REAL E	STATE ASSOCIATE	S, INC.				
Current Principal Place of Business:				New Principal Place of Business:				
304 S.W. RUM ISLAND TERRACE FORT WHITE, FL 32038				4918 14TH STREET WEST BRADENTON, FL 34207				
Current Mailing Address:					New Mailing Address:			
332 WHITE WOODBU		OCKS ROAD 798 US						
FEI Number:	59-3438225	FEI Numb	per Applied For ()	FEI Nun	nber Not Appli	cable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:					Name and Address of New Registered Agent:			
SHERMAN, BRUCE 304 S.W. RUM ISLAND TERRACE FORT WHITE, FL 32038 US					SHERMAN, BRUCE 4918 14TH STREET WEST BRADENTON, FL 34207 US			
The above in the State			s statement for the p	urpose o	f changing it	s register	ed office or registered agent, or both,	
SIGNATURE:					03/24/2009			
Electronic Signature of Registered Agent					Date			
Election Can	npaign Finan	cing Trust Fund	Contribution ().					
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:				
Title: Name: Address: City-St-Zip:		() Delete JEFF DEER ROCKS F Y, CT 06798	ROAD		Title: () Change () Addition Name: Address: City-St-Zip:			
Title: Name: Address: City-St-Zip:		()Delete BRUCE UM ISLAND TER FE, FL 32038	RACE		Title: Name: Address: City-St-Zip:	DVP SHERMAN P.O. BOX GAINESVII		
Title:	DVPS	() Delete			Title:	DVPS	(X) Change () Addition	

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.

Name:

Address:

City-St-Zip:

SHERMAN, JUDITH

157 SOUTH HIGHLAND AVE

PEARL RIVER, NY 10965

SIGNATURE: JEFF SHERMAN DPT 03/24/2009